

# The Fun House Day Care

2776 Rt. # 2  
Hermon, ME 04401

## Child's Record

Child's Name: \_\_\_\_\_.

Admission Date: \_\_\_\_\_ Discharge Date: \_\_\_\_\_.

Date of Birth: \_\_\_\_\_.

Address: \_\_\_\_\_.

Phone: \_\_\_\_\_.

### Parent's Names, Place of Work, and Phones:

Mother: \_\_\_\_\_.

Father: \_\_\_\_\_.

What method should I use to contact you if necessary while your child is in my care? \_\_\_\_\_.

### Who should I contact (In an emergency) if no parent can be reached?

Name: \_\_\_\_\_.

Address: \_\_\_\_\_.

Phone: \_\_\_\_\_.

### Child's Physician

Name: \_\_\_\_\_.

Address: \_\_\_\_\_.

Phone: \_\_\_\_\_.

### Child's Dentist

Name: \_\_\_\_\_.

Address: \_\_\_\_\_.

Phone: \_\_\_\_\_.

Any names of persons who may be permitted by the parent(s) to remove the child from the facility: \_\_\_\_\_, \_\_\_\_\_.

Any allergies and or other health conditions, if known.

\_\_\_\_\_.

\_\_\_\_\_.