Dear Parents/Guardians,

Please help us to know you and your child a little better. We want to create a comfortable and welcoming environment on their first day. You may return this questionnaire to the KinderHaus office with your other enrollment paperwork. Thank you!



Child's Name	Nickname
How did you choose KinderHaus?	
Is this your child's first daycare setting?	? If not, where were they previously?
makeup about which we should be aware?	
	Food Allergies/Sensitivity
Best way to contact you during KinderHau	
	environment easily? If not, what are some ways we
Comfort Items (if any):	
If my child has trouble falling asleep, I us	sually:
Does your child have any fears (if so, exp	
Anything else you would like to share with (premature at birth, complications with pi	n us about your child that would be helpful as we care for them? regnancy/delivery, gets along with peers/adults, likes/dislikes, habits, their life, etc.) You may use the back if needed.