Toddler Information

(19 months to 36 months)

Child's Full Name:		_	Date:	
Age (in Months):		_		
Allergies:		_		
Sibling in daycare: YES	S/NO Name :			
Bottle Fed: YES/NO	How many brought: _	Times:		Warmed: YES/NO
Last Diaper Change: _	Diape	er Rash: YES/NO	Diaper Cream:	YES/NO
Potty Trained: YES/NO)			
Labelled Special Blanket or Stuffed animal?				Soother: YES/NO
Sleep Habits (rocked, wrapped, back rubbing, pats etc)				
Nap Times:				
Any Special Instruction	ns?			

While we try to follow your child's schedule to the best of our ability, sometimes the new environment can cause disruptions to their normal patterns and routines.