

Date :

My Personal routines

First name : Surname :
Date of birth : Age :
Weight :

Contact details of Parents/Guardian during the holiday period (Name/n° tel/relationship to child)
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Address in the resort
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Who is allowed to collect me from Child care? (Surname/First name)
A piece of identity will be requested
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Is this the 1st time in child care? Yes No

EATING AND DRINKING
Special dietary requirements, allergy(s)/intolerance(s), additional information :
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TOILET TRAINING
Nappies (Diapers) day/night, propose the toilets, products for changing nappies, additional information :
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SLEEP
Usual nap schedule, signs of fatigue, description of teddy/dummy (pacifier), routines, additional information :
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ADDITIONAL INFORMATION OF IMPORTANCE :
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Completed by (Surname, First name, relationship to child) :
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.....

Signature :