

St. John's Preschool

2018-2019 Child Information Form

stjohnspreschoolnaperville.org

750 Aurora Avenue Naperville, IL 60540

630-355-1669

Child's Name _____ Name to be used at school _____

List your child's favorite activities: _____

List any fears your child may have: _____

Describe your child's temperament: _____

What are your goals for your child in preschool this year? _____

Are there any hobbies or occupations that you could share with the class? _____

List siblings and ages: _____

Permission (please circle preference)

I give **consent/do not give consent** for my child's photograph to be included in marketing materials for St. John's Preschool, including but not limited to advertising and publicity materials, school website, bulletin boards and posters.

Parent/Guardian Signature

Date

I give **consent/do not give consent** for my child to be included in a class list with address, e-mail and phone number to be shared with other St. John's Preschool class members only.

Parent/Guardian Signature

Date

I give **consent/do not give consent** for my child to go on walking field trips. I understand all such field trips are under the supervision of St. John's Preschool and that safety precautions are taken in compliance with DCFS standards.

Parent/Guardian Signature

Date

LEARN • PLAY • GROW