

Babysitter Information

Emergency Information

Parent's names _____

Cell phone(s) _____

Where we'll be _____

Emergency contact _____

Child #1 _____ Age _____

Special care _____

Child #2 _____ Age _____

Special care _____

Child #3 _____ Age _____

Special care _____

Child #4 _____ Age _____

Special care _____

Child #5 _____ Age _____

Special care _____

Food

Meals _____

Snacks _____

Off-limits _____

Bedtime Routine

Important Rules

Notes: _____

