



Getting to know me



My name is _____

My Birthday is _____

My Mum's name is _____ My Dad's name is _____

MEALS AND BOTTLES

Allergies & Food preferences

I have a bottle Yes No

I have my bottle at _____

Instructions _____

SLEEP ROUTINE

Dummy Yes No

Blanket Yes No

Teddy Yes No

Bottle PLEASE SEE UNDER MEALS AND BOTTLES

Other: _____

I can use the centre's sunscreen Yes No

Other _____

I can wear the centre's nappies Yes No

Other _____