Child Record Form

Name of registered Childminder: Caroline Miller
Registration no: EY239703

Child's Name	**Sex M/F**	**Date of Birth / /**
Address		
		Postcode
Allergies/ special diet/ health problems/childhood illnesses		
Language spoken at home	**Childs religion / culture**	

Name of parent(s)/Guardian(s) **Parental responsibility (Please circle) Y/N**	
Address	
	Postcode
Telephone Number	

Name of parent(s)/Guardian(s) **Parental responsibility (Please circle) Y/N**	
Address	
	Postcode
Telephone Number	

Name of emergency contact	
Address	
	Postcode
Telephone Number	

Signed Parent Guardian…….. **Date**……

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