

# The Learning Tree Daycare and Preschool

**PHOTO**

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

Hair Color: \_\_\_\_\_

Eye Color: \_\_\_\_\_

Birthmarks: \_\_\_\_\_

Gender: \_\_\_\_\_

Race: \_\_\_\_\_

Parents Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

## Contact Information

House Number: \_\_\_\_\_

Work Number: \_\_\_\_\_ Ext.: \_\_\_\_\_

Cell Phone(s): \_\_\_\_\_

Relatives (in order you would like us to call)

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