

BABYSITTER CHECKLIST



GENERAL INFO | Our names: _____ Residence phone: _____
Residence address: _____ Cross streets: _____

TO CONTACT US | Where we will be: _____ Time expected home: _____
Address: _____ Phone: _____
Cell phone: _____ Secondary cell phone: _____

CHILD(REN)'S INFO | Name: _____ DOB: _____ Allergies/special needs: _____
Name: _____ DOB: _____ Allergies/special needs: _____
Name: _____ DOB: _____ Allergies/special needs: _____
Mealtime: _____ Bedtime: _____ Snacks: _____
Additional information or special instructions: _____

IN AN EMERGENCY | Poison Control: _____ Doctor: _____
Neighbor: _____ Relative: _____
Our fire extinguisher is located: _____

Call 911

HOUSE RULES | TV & computer programs that are un/acceptable: _____
Foods that are un/acceptable: _____
Guidelines for outside play: _____
Guidelines for inside play: _____
Guidelines for company: _____
Bedtime routine: _____

FOOD GUIDELINES | *Never leave a child unattended with food. Make sure any food given to a child under 4 years old is cut into small pieces (size of a fingertip). Avoid giving raisins, hot dogs, raw carrots, celery, grapes, nuts, hard candy, gum, popcorn, raw pears and apples to children under 4 years of age. For ages 4 to 6, be sure to peel and cube apples, pears, and carrots. Never drink or eat anything hot while holding a baby.*

PARENTAL RELEASE | In the event that there is a medical emergency, below is an Emergency Treatment Release:
Child's name: _____ Birthdate: _____
Health insurance provider: _____ Policy number: _____

Any licensed physician, dentist, or hospital may give necessary emergency medical service to my child at the request of the person bearing this request form.

Signature of Parent or Legal Guardian

Date