

# MOTHER'S DAY OUT INFORMATION SHEET

Mothers Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Business Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Business Phone: \_\_\_\_\_

Child's Name: \_\_\_\_\_ age \_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_ age \_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_ age \_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_ age \_\_\_\_\_ DOB \_\_\_\_\_

## EMERGENCY CONTACT (other than parent)

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ other phone \_\_\_\_\_  
Family Doctor \_\_\_\_\_ Phone \_\_\_\_\_

List any allergies or medical problems  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Church Affiliation \_\_\_\_\_

Do you plan to bring your child on Tuesday \_\_\_\_\_ Thursday \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Enrollment Fee paid -  
\$15.00 per kid/ year for craft supplies \_\_\_\_\_

**Please read through our packet. Once you have read through it. Please sign, date & return.**

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**Also we have a Facebook page. If you are okay with me taking and posting some pictures of our day with your child to our page. Please sign and date. If you Do Not sign, I will Not put your child's picture on our page.**

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**Thanks**

**Jennifer Sappington**