



CLEAR LAKE MONTESSORI SCHOOL

Respect Yourself, Respect Others, Respect Your Environment

Today's Date : _____

Welcome Note:

Start Date _____

Transition days _____

Child's Name _____

Date of Birth _____

Male Female

Allergies _____

Special Needs - If needed _____

Diet restrictions -If needed _____

Eating habits _____

Nap schedule at home _____

Toileting _____

Additional Information _____

Favorite Food

Favorite Book

Favorite Song/Rhymes