



# All About Me

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**Child's Full Name:**

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**Nickname:**

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**Birthday:**

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**Mother's Name:**

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**Father's Name:** \_\_\_\_\_

**Sibling's Names and Ages:** \_\_\_\_\_

**Pets (Type and Name):** \_\_\_\_\_

**Favorite Foods:** \_\_\_\_\_

**Dietary Restrictions:**

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**Bathroom Word/Expression/Habits:**

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**Favorite Toy or Game:** \_\_\_\_\_

**Habits (Thumb Sucking, etc.):** \_\_\_\_\_

**Fears (My Child is afraid of):**

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**Medical Information (Allergies, Medications, Physical Restrictions, etc.):**

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**Other Information or Comments:**

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