



Super Sitter Notes

Parents' names:

First: _____ Last: _____

First: _____ Last: _____

Home Address: _____

Home Telephone #: _____

How to Reach Parents: _____

Where Parents Will Be: _____

Until: _____ The phone #: _____

If unable to reach parent, call: _____

Telephone #: _____

Special instructions

Nap Time/Bedtime: _____

Meals: _____

Snacks: _____

Medication: _____

Home Rules: _____

Other Notes: _____

In case of **emergency**, call **911**

In case of **poisoning**, call **1.800.222.1222**

