TODAY'S DATE _____



NOTES FOR THE NANNY



PARENT INFORMATION	MEDICAL & ALLERGIES
Cell phone(s):	Family doctor:
ocation & phone:	Allergies:
Emergency contact:	Medication:
	MEALC
	MEALS
We last ate:	Please feed us:
When: What:	When: What:
	Toothbrushes are: Outdoor gear is:
HOUSE	RULES & ROUTINES
Bedtime is:	Screen time allowed:



