



Baby Sitter Memo

- We Are At _____
- The Phone Number There Is _____
- We Will Be Home By _____

Special Information

- Medication _____
- Directions For Dosage _____
- Snacks Kids Can Eat _____
- Toys and Games _____
- Bath Time _____ Bed Time _____
- Other _____

Emergency Information

- Our Name _____
- Our Address _____
- Our Phone Number _____
- Family Doctor _____
Phone Number _____
- Relative or Neighbor _____
Phone Number _____
- Relative or Neighbor _____
Phone Number _____

Additional Information:
