



**MEDICAL & ADDITIONAL INFORMATION**

Name and telephone no. of child's doctor \_\_\_\_\_  
Name and address of child's clinic \_\_\_\_\_  
Child's PESEL number \_\_\_\_\_  
Details of any other Health Insurance valid in Warsaw \_\_\_\_\_  
\_\_\_\_\_

Relatives/friends who may be contacted in the event of an emergency during school hours:

Name: \_\_\_\_\_ tel. \_\_\_\_\_

Name: \_\_\_\_\_ tel. \_\_\_\_\_

**PLEASE GIVE DETAILS OF ANY ALLERGIES OR OTHER HEALTH CONDITION WHICH SCHOOL SHOULD KNOW ABOUT:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Vaccinations/Immunisations**

Detail of any vaccinations/immunisations already received by your child:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## DIET

Does your child have special dietary needs?

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**Which diet would you like Pooh Corner to order for your child:**

- universal nutritious diet for children YES/NO
- vegan diet for children YES/NO
- no milk diet for children YES/NO
- no gluten diet for children YES/NO
- no milk & no gluten diet YES/NO

What is your child's favourite food and drink?

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What does your child prefer not to eat or drink?

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## MORE ABOUT THE CHILD

Does your child have brothers and/or sisters and what are their ages?

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Is your child toilet trained, if yes, since when? \_\_\_\_\_

Does your child use a potty or a toilet? \_\_\_\_\_

What is your "key word" for going to toilet? \_\_\_\_\_

**Special interests your child has** \_\_\_\_\_

\_\_\_\_\_

The child's favourite (toy, book, play, animal, others) \_\_\_\_\_

\_\_\_\_\_

Do you have animals at home, if yes which? \_\_\_\_\_

What are your child's sleeping habits? \_\_\_\_\_

\_\_\_\_\_

Is your child afraid of anything? \_\_\_\_\_

**Please list the places where your child has lived and the dates:**

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Languages spoken at home:

First: \_\_\_\_\_

Second: \_\_\_\_\_

**Does Pooh Corner have your permission to use occasionally taken photographs of you and your child on it's:**

Facebook page YES/NO

[www.poohcorner.pl](http://www.poohcorner.pl) web site YES/NO

\_\_\_\_\_  
Signature of Parent/Guardian

**THANK YOU FOR GIVING US ALL THE INFORMATION WE NEED!!!**