



Little Violets

SITTER CHEAT SHEET

Fill this in once and keep it handy. Everything your sitter needs, at a glance.

■ The child

Full name

Date of birth

Age

What they like to be called

Allergies, and exactly what to do in a reaction

Medical conditions or special needs

Medications or supplements, with instructions

■ Who to call

Parent or guardian 1 — name

Mobile

Relationship to child

Parent or guardian 2 — name

Mobile

Relationship to child

Home address

Emergency contact 1 — name

Mobile

Relationship to child

Emergency contact 2 — name

Mobile

Relationship to child

Doctor or clinic

Phone

■ Daily rhythm

Bedtime

Wake time(s)

Naps, and how they like to settle (toy, dummy, routine)

Breakfast

Lunch

Dinner

Snacks

Dietary needs, dislikes, or mealtime notes

Screen time — limits and what's okay

■ House rules and notes

House rules, chores, or reward system

Anything else I should know?

■ Consent

As parent or guardian, I consent for my child to receive first aid and, if needed, emergency care, and for the emergency contacts above to act on my behalf until I can be reached. I will keep this sheet up to date.

Parent or guardian name

Date

Signature
