

Auntie M's Emergency Nanny Service

Trustworthy, on-call child care in your home.

Please complete one form per child.

Child's Name: _____

Age/Grade: _____

Parent's names: _____

Parent contact information:

phone: _____

e-mail: _____

Child's allergies, medical condition, medications to be administered:

Daily routine/family policies (homework, snacks, bedtime, computer/phone/game use, etc.):

Meals to be prepared/served:

Child's likes/dislikes:

Contact Marlys Tamte

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