FLAG SHEET (SAMPLE)

Children Name: _____ D.O.B. ____ Custodial Parent (or parent with primary care and control) Name: Home Phone # _____ Work Phone # _____ Alternate _____ Home Phone # _____ Work Phone # _____ **Other Parent** Name: Photograph on File? _____ Description: Vehicle: Colour _____ Year ____ Make _____ Model _____ Licence #_____ Particulars of Documentation on file: Authorization Signed: _____ Specific Historical Data: Updated and Reviewed By: _____ (Child Care Provider)

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