

# BABYSITTER'S CHECKLIST

Take a copy of this checklist every time you baby-sit.  
Have the parents help you fill it out before they leave.

Place photo of  
child here, or  
attach photo of  
child to this form  
for identification.

Child's name: \_\_\_\_\_ Age: \_\_\_\_\_ Weight: \_\_\_\_\_

Parents are at: \_\_\_\_\_

Parents will be home at: \_\_\_\_\_

Telephone number to reach parents: \_\_\_\_\_

If cannot reach parents, call: \_\_\_\_\_ At: \_\_\_\_\_

In case of emergency, call: \_\_\_\_\_

Police: \_\_\_\_\_ Fire: \_\_\_\_\_

Doctor's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Poison Control Center: \_\_\_\_\_

Medical problems: \_\_\_\_\_

Allergies: \_\_\_\_\_

Special Instructions\*: \_\_\_\_\_

\*If a child is to be given medication by a babysitter, make sure the child's name, the name of the medicine and the proper dosing information is available on the label and discussed with the parents to be sure you understand. Make sure you know where it is stored and put the medicine away in its safe place when done using.