



Welcome to Judy Sare  
Nursery School + Camp Simcha

Parent Survey: Please fill out so our teachers can get to know you &  
your little one even better!

Name: \_\_\_\_\_ Birthday \_\_\_\_\_

Any siblings? Names & Ages: \_\_\_\_\_

What are 3 adjectives you'd use to describe your child?

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Any allergies/illnesses/issues you would like us to be aware of?

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Favorites:

Foods:

Activities:

Toys:

Holidays:

Places:

What are a few goals you have for your little ones over the course of  
the school year? (learning shapes, colors, letters...learning to  
share...etc...) \_\_\_\_\_

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Is there anything else you would like us to know about your child?