

Good Shepherd Lutheran Church - Club 139

Intake Form & Parent Questionnaire for Children with Additional needs.

Good Shepherd Lutheran Church cares for each participant inside our family ministry. These questions are asked for the benefit of your child, and so that we may provide the best experience and safest environment or involved. Our church leaders and everyone our ministry volunteers respect our family's right to Any information shared from this privacy. is communicated directly form with those caring for your child and only on a "need to know" basis. Please answer the below that questions and that apply your child may help our church best minister to your child.

Form completed by:	
Relationship:	Date:
Participant Name:	DOB:
Parent Contact:	
Placement:	(completed by church staff
My child has the following diagnosis, medica	l condition or learning difference:
My child has the following allergies and/or fo	ood sensitivities:
My child's main mode of functional commun	lication is:
The goals I have for my child's development t	this coming year include (behavioral, social, academic, etc.):
My child has the following are(s) of interest:	
My Child can do these things independently:	