



BABYSITTER CHECKLIST

WELCOME TO OUR HOME

Address _____

Parents' names _____

Phone # _____

Phone # _____

Kids' names/ages _____

Where we'll be _____

When we'll be home _____

Pets' names _____

MEDICAL & EMERGENCY

In case of an emergency, **dial 911**

Poison Control **800.222.1222**

Pediatrician info _____

Insurance holder _____

Insurance policy # _____

Emergency contact _____

Name _____

Phone _____

Relationship _____

Thermometer/medicine location _____

Medication instructions _____

First aid kit location _____

ELECTRONICS & SCREEN TIME

How to use our TV _____

Screen time limit _____

Other info _____

FOOD & DRINKS

Mealtime _____

What to feed them _____

Snacks? _____

If so... _____

Food allergies _____

Help yourself to _____

Other info _____

BATH & BEDTIME

Bath time _____

Bath time routine _____

Nap time _____

Bedtime _____

Sleep routine _____

Other info _____

ONCE THE KIDS GO TO BED

WiFi _____

Are friends allowed over? _____

Other expectations _____
