

# Kidz Wonderland, LLC

## FAMILY DAY CARE HOME

HUMA

☎ (408) 373-5988

Ambreen

License # 013422990

☎ (408) 771-4966

36640 Bonito Drive, Fremont CA 94536

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### Allergy Disclosure Form

Please inform us about any allergies or food restrictions for your child.

Child Name: \_\_\_\_\_

Parent Name: \_\_\_\_\_

1. \_\_\_\_ My child has no known allergies.

2. \_\_\_\_ My child is allergic to the following items/medications/foods:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. If your child has any allergies, please provide special instructions for the treatment of a reaction:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_