



My Growing Years

a keepsake of my first five years

MILESTONE & MEMORY BOOK · AGES 0-5

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Welcome, Little One

a note before you begin

This book is your little pause button — a place to catch the tiny moments before they slip by. The first smiles, the first steps, the everyday little things that feel small now but mean everything later.

You don't have to fill in every page, and you don't have to do it all at once. Write a little whenever you can. Every word you add here is a gift your child will treasure one day — proof of how loved and watched-over they were, right from the start.

A small note: the ages mentioned in this book are just general guides, not a race. Every child grows at their own pace, and that pace is the right one for them. Your pediatrician is the ideal person to consult if you have any questions regarding your child's development.

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With love, from one parent-run project to another — zaminotoys.in



All About Me



FULL NAME:

DATE OF BIRTH: **TIME OF BIRTH:**

HEIGHT AT BIRTH:..... **WEIGHT AT BIRTH:**

PLACE OF BIRTH:

HOSPITAL / DOCTOR: **BLOOD GROUP:**

FATHER'S NAME:

MOTHER'S NAME:

A MESSAGE FROM MY PARENTS ON THE DAY I WAS BORN:

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

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My Hand & Footprints

press gently in ink, or trace an outline

handprint here

footprint here

DATE TAKEN

AGE

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My First Photos

my birth photo

first family photo

WHO WAS THERE TO WELCOME ME

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My Firsts



First Smile:

.....



First Laugh:

.....



First Bath at Home:

.....



First Outing:

.....



First Haircut:

.....



First Time Meeting a Pet:

.....



First Time I Reacted to Music:

.....



First Time I Saw Rain:

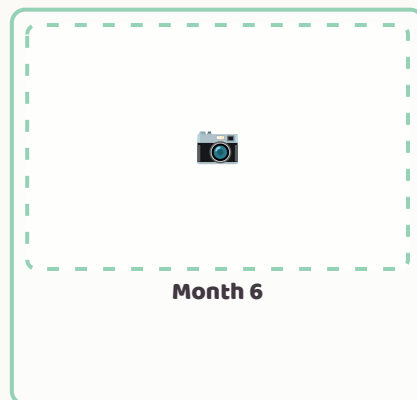
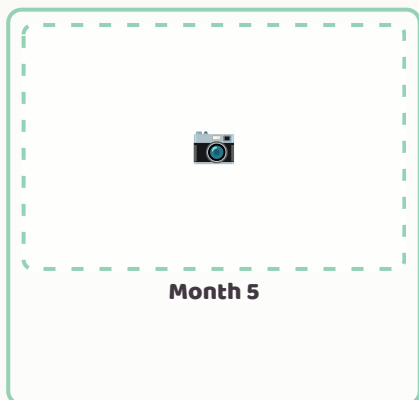
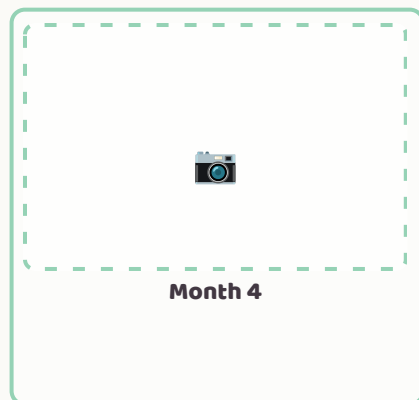
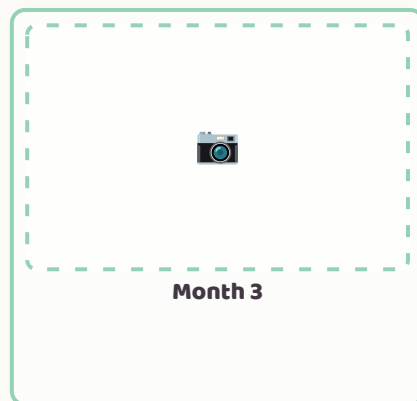
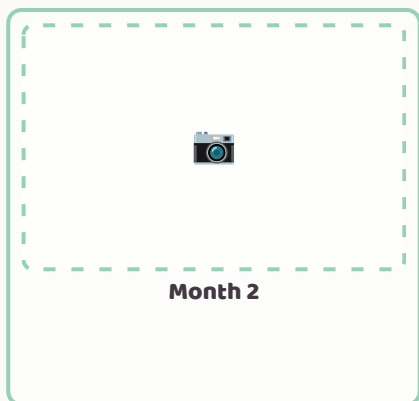
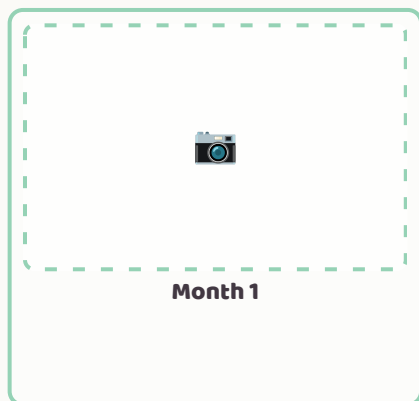
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Month by Month – Part 1

one photo a month, watching me grow





Month by Month — Part 2

one photo a month, watching me grow



Month 7



Month 8



Month 9



Month 10



Month 11



Month 12





Movement Milestones

(0-12 months)



Tummy Time (first time)

.....



Rolled Over (first time)

.....



Held Head Up Steadily

.....



Sat Without Support

.....



Started Crawling

.....



Pulled Up to Stand

.....



Cruised Along Furniture

.....



First Independent Steps

.....





Feeding & Teeth



First Feed

.....



First Solid Food (after 6 months)

.....



First Tooth

.....



Started Self-Feeding

.....



First Sip From a Cup

.....



My Favourite Food As a Baby

.....

my first taste of solid food





Communication Milestones



First Coo / Vocal Sound

.....



First Babble (ba-ba, da-da)

.....



Waved Bye-Bye

.....



Responded to My Name

.....



First Word

.....



First Two-Word Phrase

.....





Growth Tracker

fill in at each check-up

Age	Height	Weight	Head Circ.	Doctor's Note
Birth				
1 Month				
2 Months				
3 Months				
6 Months				
9 Months				
12 Months				
18 Months				
2 Years				
3 Years				
4 Years				
5 Years				





My First Birthday

my first birthday photo

HOW WE CELEBRATED:

WHO CAME TO MY PARTY:

MY REACTION TO THE CAKE:

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Year Two Milestones

(1-2 years)



Walking Confidently / Running



Climbing Steps



Speaking in Short Phrases



Started Scribbling



**Drinking From a Cup
Independently**



Started Potty Training

a Year Two memory

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Year Three Milestones (2-3 years)



Speaking in Full Sentences



Riding a Tricycle



Counting to Five



Sharing Toys / Playing With Others



Dressing Self (with help)



Fully Potty Trained

a Year Three memory





Year Four Milestones (3-4 years)



Drawing Shapes / People



Hopping on One Foot



Telling Simple Stories



Making a Best Friend



**Pouring Water / Serving Self
(independence skill)**



Buttoning / Zipping Clothes

a Year Four memory





Year Five & School Days (5 years)



Writing My Name



Counting to Twenty



Riding a Bicycle



Getting Along With Other Children



First Day of School

SCHOOL NAME

TEACHER'S NAME

my first day of school

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Vaccination Tracker

follow your paediatrician's exact schedule – general guide only

Vaccine	Date Given	Next Due
BCG		
OPV / Hepatitis B (Birth Dose)		
6 Weeks — DPT / IPV / Hep B / Hib / Rotavirus		
10 Weeks — DPT / IPV / Hib / Rotavirus		
14 Weeks — DPT / IPV / Hib / Rotavirus		
9 Months — Measles / MR / JE (as applicable)		
16-24 Months — DPT / OPV Booster / MMR		
5-6 Years — DPT Booster		
Other / As Advised by Paediatrician		
Other / As Advised by Paediatrician		

"Vaccination schedules can vary by doctor's advice and health guidelines — always confirm dates and doses with your paediatrician."





Doctor Visits & Health Notes

check-ups, illnesses, and things to remember

Date	Reason for Visit	Doctor's Notes





My Favourites



Favourite Toy



Favourite Book



Favourite Song



Favourite Food



Favourite Colour



Favourite Place to Visit



Favourite Cartoon / Show



Favourite Game





People Who Love Me

the people who make up my little world

 **Father**

 **Mother**

 **Grandparent**

 **Grandparent**

 **My Favourite Person in the Family**

 **My Pet**

 **My Best Friend**

 **A Special Teacher**

a family photo





A Letter To You

Dear little one, here is what we want you to always know...

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Thank You for Growing With Us

Every page of this book is a page of your story.

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