



Preschool Health Form

Admission Requirement: If your child does not attend pre-Kindergarten or school away from the childcare operation, or within one week of admission.

Please check only one option:

- Health Care Professional Statement: I have examined the above named child within the past year and find that he/she is physically able to take part in the day care program.

Health Care Professional Signature

Date

- A signed and dated copy of a health care professional statement attached.
- Medical diagnosis and treatment conflict with the tenets and practices of a recognized religious organization, which I adhere to or am a member of, I have attached a signed affidavit stating this.
- My child has been examined within the past year by a health care professional and is able to participate in a day care program. Within 12 months of admission, I will obtain a health care professional's signed statement and will submit it to the childcare operation.

Name and Address of Health Care

Professional: _____

Parent/Guardian Signature

Date