bloomin' preschools

Great Start Readiness Program
Michigan's Nationally Recognized Pre-K Program

Date Reviewed	Initials	Date Reviewed	Initials

Child's Name: _____ **Date:**_____
LAST name, FIRST name

MUST be turned in at time of registration or checked and initialed yearly:

- ☐ **Birth Certificate**
- ☐ **Class List Publication**
- ☐ **Communications Release** ☐ **District-Opt Out** ☐ **BP Form**
- ☐ **Driver's License**
- ☐ **Emergency Card**
- ☐ **Income – Proof**
- ☐ **Lunch Form – Free & Reduced form** (available in July)
- ☐ **Student Enrollment Form**

MUST be turned in by July 15:

- ☐ **Health Form** (expiration date: _____)

(2 ½-5 yr olds: Health forms are good for two years from date of exam.)

Optional:

- ☐ **Child Care Registration Form**
- ☐ _____

Please visit our website, **Bloomfield.org/Bloomin** to view our *Family Handbook;* which includes our philosophy, daily routines, building information, and policies & procedures. Printed copies are available upon request. Our *Licensing Notebook*; which includes all licensing reports is available in the Office during hours of operation.
www.michigan.gov/michildcare

Initial/Date

Updated Feb 2019