



blamin' preschools

Date Reviewed	Initials	Date Reviewed	Initials	Date Reviewed	Initials	Date Reviewed	Initials

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

MUST turn in at time of registration or check and initial yearly:

- Birth Certificate**
- Class List Publication**
- Communications Release** District-Opt Out BP Form
- C-19 Health Screener Form**
- Emergency Card**
 - File copy** (date: ____) (date: ____) (date: ____) (date: ____) (date: ____) (date: ____)
- Registration Form/Confirmation page**
 - File copy** (date: ____) (date: ____) (date: ____) (date: ____) (date: ____) (date: ____)
- Student Enrollment Form**

New enrollees MUST be turned in by August 1:

- Health Form** (exp date: ____) (exp date: ____) (exp date: ____) (exp date: ____) (exp date: ____)
(2 ½-5 yr olds: Health forms are good for two years from date of exam) / (6 wks-2 ½ yr olds: Health forms are good for one year from date of exam)
- Immunization Record** (print date: ____) (print date: ____) (print date: ____)
(print date: ____) (print date: ____) (print date: ____) (print date: ____) (print date: ____) (print date: ____) (print date: ____)

MUST turn in at least a week before child starts:

- Infant/Toddler Info Sheet** (Infants/Toddlers only, due yearly)

Optional:

- EFT** (credit card authorization on file – electronic funds transfer)
- Before/After Care Form**
- _____