

KidsEdge Preschool
Health Care Professional
Healthy Child Statement 2019-2020

All children must have a signed statement at time of online registration. All children 4 years and up must also include a copy of the vision and hearing screening performed at their 4 year well check.

ADMISSION REQUIREMENT: One of the following must be presented when your child is admitted to KidsEdge Preschool.

Please check only ONE option (1,2 or 3):

1. ____ HEALTH CARE PROFESSIONAL STATEMENT:

I have examined _____ within the past year and find that he/she is able to take part in the child care program.

Signature of Health Care Professional

Date

* Hearing & Vision Screening Results (4 and 5 year old children ONLY) :

Hearing Screen Results - _____ Date - _____

Vision Screening Results – Right: _____ Left: _____ Bilateral : _____ Date - _____

2. ____ A signed and dated copy of a health care professional's statement is attached.

3. ____ 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 and dated affidavit stating this.

Name of Health Care Professional

Phone

Address of Health Care Professional :

*** If your child has food allergies, please include a food allergy emergency plan with this form.** A food allergy emergency plan is an individualized plan prepared by the child's health care professional. This plan must include a list of each food the child is allergic to, possible symptoms if exposed to food on the list and the steps to take if the child has an allergic reaction.

- plan must be signed and dated by the child's health care professional and parent

- a copy of the plan will be kept in the child's file

*** All children 4 years and up must also include a copy of the vision and hearing screening performed at their 4 year well check.**