ADMISSION REQUIREMENT

of the				ay from the child care operation, one itted to the child care operation or
Child	Name			
Check	only one option:			
	Health care Professionals Statemer year and find that he or she is able			e above-named child within the past care program.
	Signature – Health Care Profess	sional	:	Date Signed
	A signed and dated copy of a health care professionals' statement is 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 and dated affidavit stating this.			
	My child has been examined within the past year by a health care professional and is able to participate in the daycare program. Within 12 months of admission, I will obtain a health care professional's signed statement and submit it to the child care operation.			
Name		Address	of Health Car	re Professional
-	Signature – Parent of Legal Gu	ardian		Date Signed