

Childcare Checklist Form

Child's Name: _____ Date: _____ Site: _____

Form Type	Completion Date – Employees Initials	Notes
Registration Form		
Childcare/Fee Agreement		
Developmental History		
Immunization Records		
ATC Allergy Policy Acknowledgment		
Food Allergy Form		
Consent to Medical Care & Treatment of a Minor		
Authorization For Emergency Care Form		
Childcare Medication Authorization Form		
Non-Prescription Medication Form		
Prescription Medication Log		
Permissions Form		
Photo Release Form		
Emergency Contact		
Individual Care Plan		
Handbook Acknowledgment		

Schedule: _____ Payment: _____

Notes: _____