Child’s Name: Parent Name:

Class: □AM1 □AM2 □PM1 □PM2 □HB

|  |  |  |
| --- | --- | --- |
| Forms | Required Prior to Entry  | Completed/Signed |
| 1-20 | Confidentiality Form  |  |
| 1-71 | Volunteer Declaration  |  |
| 2-28 | General Permission  |  |
| 3-9 | Health Services Policy  |  |
| 3-11 | Emergency Form  |  |
| 5-1 | Permission Form  |  |
| USDA | Enrollment |  |
| 2-27a | Child Guidance Policy |  |
| 3-46/3-48 | Medical and Allergy Forms (if needed) |  |
| 3-8a | Medical Log (if needed) |  |
| USDA/3-1 | Food Substitutions (if needed) |  |
| \*This form is to ensure that all required enrollment documentation is completed prior to entry (first day of class). |
|  |  |