

# 2021/2022 APPLICATION FOR ENROLLMENT

Child's Full Name \_\_\_\_\_ Nickname \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age as of September 1, 2021 \_\_\_\_\_

Telephone # \_\_\_\_\_ Religious Affiliation \_\_\_\_\_

School Attending \_\_\_\_\_ Sex \_\_\_\_\_

Mother's Name \_\_\_\_\_ Mother's Cell Phone Number \_\_\_\_\_

Mother's E-Mail Address \_\_\_\_\_

Home Address \_\_\_\_\_

Business Address \_\_\_\_\_ Business Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Father's Cell Phone \_\_\_\_\_

Father's E-Mail Address \_\_\_\_\_

Home Address \_\_\_\_\_

Business Address \_\_\_\_\_ Business Phone \_\_\_\_\_

Are parents Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Living Together \_\_\_\_\_

Other Family Members (names and ages): \_\_\_\_\_

Person to notify in Case of Illness (other than Parents):

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Business Address \_\_\_\_\_ Business Phone \_\_\_\_\_

Health Insurance coverage for child under family insurance policy or medical assistance if applicable:

Insurance Provider \_\_\_\_\_ Policy Number (Required) \_\_\_\_\_

Physician's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Any additional information or special needs of the child that may require special attention (re: allergies, unusual health considerations or child custody considerations) \_\_\_\_\_

**office use only:** *rgfee* \_\_\_\_\_ *dep* \_\_\_\_\_ *med* \_\_\_\_\_ *database* \_\_\_\_\_

# EMERGENCY CONTACT / PARENTAL CONSENT FORM

CHILD'S NAME	Birthdate
Address	
<b>MOTHER'S NAME/LEGAL GUARDIAN</b>	Home Telephone
Address	Mother's Email
Cellular Phone	
Business Name	Bus. Telephone
Address	
<b>FATHER'S NAME/LEGAL GUARDIAN</b>	Home Telephone
Address	Father's Email
Cellular Phone	
Business Name	Bus. Telephone
Address	
<b>Emergency Contact Person(s)</b>	<b>Telephone Number</b>
<b>Person's To Whom The Child May Be Released</b> <b>NAME AND ADDRESS REQUIRED!</b>	<b>Telephone Number</b>
<b>NAME:</b>	<b>ADDRESS:</b>
<b>NAME OF CHILD'S PHYSICIAN/MEDICAL CARE PROVIDER</b>	<b>TELEPHONE NUMBER</b>
Address	
Special Disabilities (If Any)	
Medical or Dietary Information Necessary In An Emergency	Allergies (Including Medication Reaction)
Additional Information On Special Needs Of Child	Medication, Special Conditions
Health Insurance Coverage For Child Or Medical Assistance Benefits	<b>POLICY NUMBER (REQUIRED)</b>
<b>PARENT'S SIGNATURE IS REQUIRED FOR EACH ITEM BELOW IN ORDER TO BE ENROLLED AT WINDMILL DAY SCHOOL!</b>	
<b>OBTAINING EMERGENCY MEDICAL CARE</b>	<b>ADMIN. OF MINOR FIRST-AID PROCEDURES</b>
<b>Walks And Trips</b>	<b>Swimming</b>
<b>Transportation By The Facility</b>	<b>Wading</b>
<b>Supervised Administration of Sunscreen 30 SPF OR HIGHER</b>	<b>Supervised Administration of Hand Sanitizer</b>

**Signature Of Parent or Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

**Signature Of Parent or Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

# Windmill Day School Policy Sheet

**TUITION: SEE BELOW FOR WEEKLY PRICING: FULL TIME/5 DAYS ONLY:**

• Young Toddlers	12 - 24 Months	\$360
• Older Toddlers	24 - 36 Months	\$350
• Pre-School / Kindergarten	3 Years & Older	\$345

Despite our full time tuition requirement, you may choose to attend on a part time basis.

- Tuition rates include both a morning snack, afternoon snack and beverages.
- Supervision and child care services are provided during all hours of operation, 8:00 am - 4:30 pm.
- There is a \$100.00 non-refundable/non-transferable registration fee required with all applications for our 2021-2022 academic year.
- **This completed application, registration fee, first week's tuition plus a week for security deposit are required to secure a place in our enrollment.** These fees and deposits are all non-refundable and non-transferable. In the event that your child(ren) does not commence attendance, all monies remain non-refundable and non-transferable.
- Monthly tuition is required no later than the first day of each month. (Please keep in mind that there are four and five week months. Please pay accordingly.)
- Late tuition payments will jeopardize your child's spot in our enrollment.
- There is a \$10.00 per week discount for every additional sibling enrolled.
- There is a late charge of \$3.00 per child per minute for any child picked up after our closing time of 4:30 PM.
- There is a \$20.00 charge for all returned checks.
- Full copies of all applicable Department of Human Service's child care regulations are available online and accessible electronically on the department's website at:
  - <https://www.dhs.pa.gov/providers/Child-Care/Pages/Child-Care-Regulations.aspx>.
  - Any questions, concerns or comments, please contact our regional child care office at Office of Child Development and Early Learning (c/o Department of Human Services) SE Bureau of Certification 801 Market Street 6th Floor Philadelphia, Pa 19107 215-560-2541

CHILD'S NAME:

\_\_\_\_\_

APPROXIMATE ARRIVAL / DEPARTURE TIME:

AM/

PM

\_\_\_\_\_

ORIGINAL DATE OF ENROLLMENT/ADMISSION:

\_\_\_\_\_

START DATE OF 2021-2022 ACADEMIC YEAR:

\_\_\_\_\_

DATE OF CHILD'S WITHDRAWAL:

\_\_\_\_\_

PERSON(S) TO WHOM YOUR CHILD MAY BE RELEASED:  
ALSO PLEASE INCLUDE PARENT(S) NAMES

\_\_\_\_\_

\_\_\_\_\_  
**Signature of person responsible for tuition**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Director/Administrator**

\_\_\_\_\_  
**Date**

# Windmill Day School Policy Sheet

## **ABSENCES:**

Full tuition is due regardless of your child's actual attendance. In the event of another state mandated closure of private schools (i.e. Windmill), tuition will be due for the full week in which the closure enacts. After that week, no additional tuition will be due until Windmill reopens.

## **VACATION POLICY:**

Written notification must be given at least two weeks prior to a planned vacation. Full tuition is due for all scheduled holidays and weather/ emergency related days. **Windmill Day School will follow the Central Bucks School District for any weather/emergency related closings and/or delays.** There shall be no refunds or reductions, or transfers of tuition (to include any deposits and registration fees) for reasons of weather/emergency related closings and/or delays, absence, withdrawal, illness or dismissal.

## **TERMINATION/WITHDRAWAL:**

Withdrawal from enrollment at Windmill Day School shall require **30 days** written notice. Payment in full is required for this 30 day period regardless of attendance. Please be advised, if you withdraw your student for any length of time, you risk forfeiting your child's space and re-enrollment is not guaranteed.

**ALL STUDENTS ENROLLED AT WINDMILL (3 YEARS OF AGE THROUGH KINDERGARTEN):** If you are enrolled for our Academic Year, you are financially responsible for all weeks from time of enrollment through June 10th, 2022 (our last day of school, after which summer pricing goes into effect for both campers/toddles). After 6 months of attendance, you are eligible for 1 week of vacation credit during our academic year.\*

**TODDLE/RANCH STUDENTS:** If you are enrolled Year-Round (for both our academic year and our summer months), you are responsible for twelve monthly payments for the year. However, you are entitled to TWO weeks of vacation time\* (one week during our academic year, and one week during our summer program) . In order to be credited for vacation time, your child cannot be in attendance for that specific time period. If you are, however, enrolled for the academic year only, you are eligible for **one** week of vacation time after 6 months of attendance\*.

## **DISMISSAL POLICY:**

Windmill Day School & Camp reserves the right to cancel any enrollment or dismiss a student whose conduct, influence or behavior is deemed unsatisfactory or inimical to the best interest of the school and/or camp, in which case the unused tuition will be refunded.

## **RELATIONSHIPS:**

Windmill Day School & Camp engages teachers and other staff to provide services at the school/camp during the school/camp day. The school/camp does not recommend, sponsor, encourage or condone any arrangements whereby teachers and/or other staff provide child tutoring, baby-sitting or other out-of-school/camp services to parents of children enrolled in the school/camp. Parent(s) hereby acknowledge that if any such out-of-school/camp relationship exists, or develops in the future, the school/camp is not responsible and any involved teacher or staff is not acting within the framework or scope of his/her employment with the school/camp.

## **PHOTO RELEASE:**

I hereby authorize Windmill Day School and Camp to use any photograph or representation of my child in any advertisement, brochure, press release, social media post, email blast, Google classroom, and/or news story. I (We) have read this policy sheet and have affixed our signatures thereto:

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**Signature of person responsible for tuition**

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**Date**

## Policy Sheet (Continued)

**GENERAL ILLNESS:** It is our policy that all parents are required to keep at home any child who exhibits any of the following symptoms (accordingly, we reserve the right to contact a parent or emergency contact to have the child picked up if he/she exhibits any of the following symptoms): Diarrhea, Pinkeye / Conjunctivitis, Severe Coughing, Vomiting, Difficult or Rapid Breathing, Fever (if the child's infrared temperature is 100.0 degrees or higher), Yellowish Skin or Eyes, Head Lice (Windmill Maintains a 24 hour "No Nit" Policy), or Contagious or Unidentifiable Rashes. This is based upon the recommendation of the U.S. Department of Health and Human Service CDC. Windmill Day School & Camp also utilizes a "24 hour fever free policy." This policy mandates that any child sent home with a fever (see above) may not be readmitted to school within 24 hours of a fever WITHOUT medication and a **signed doctor's note**. Students with vomiting and/ or diarrhea will be sent home or need to stay home for 24 hours until free of vomiting and/ or diarrhea for 24 hours WITHOUT medication and a **signed doctor's note**. Students with pink eye or conjunctivitis will not be readmitted until they are prescribed medication (drops) and have used them for a minimum of 24 hours, regardless of a physician's note asserting your child is not "contagious," or may return to school.

### **COVID-RELATED PROTOCOLS:**

In an effort to mitigate the spread of the novel Coronavirus, Windmill Day School & Camp will take these additional steps as feasible and until further notice:

Children and staff will be screened daily for symptoms/signs of Covid-19. We will follow CDC recommendations if dealing with a potential case or potential exposure to Covid-19. Families that travel to any 'hot spots' on the CDC and Pennsylvania's travel advisory list will also be required to self-quarantine for 5 days and supply negative test results before re-admittance. Keep in mind that this travel advisory is ever-evolving. Windmill requires a completed 14 day health log to be submitted on your student's first day of school. Staff and students over 2 years of age will wear masks when inside and outside when not able to physically distance (exceptions include while eating, resting, and engaging in physical activity) Students who are medically exempt from mask wearing must provide a note from a doctor delineating their exemption. Physical distancing, good hygiene practices, frequent hand washing and additional cleaning and sanitizing will be practiced daily.

Due to the fluid nature of Covid and our current climate, Windmill Day School & Camp reserves the right to alter all policy and procedure. All updates/changes will be communicated via email blasts as necessary.

**Despite rigorous health and safety protocols, Windmill Day School & Camp cannot guarantee that your child may not be exposed to or contract Covid-19.**

**Please initial here that you have read and agree to Windmill's Covid Policy.** \_\_\_\_\_

### **HEALTH POLICY:**

All enrolled children are required to have a **current** age-appropriate health report on record at Windmill Day School & Camp a minimum of two business days prior to the start of enrollment. This health assessment shall be conducted according to the recommended schedule for routine health, and must remain current at all times in order to maintain your child's place in our enrollment.

### **MEDICATION POLICY:**

I understand that it is the policy of Windmill Day School & Camp to only administer medications brought from home during lunch (12:00 PM – 1:00 PM). Medication will only be accepted if it is brought in the original container and with only the single dose to be administered (unless in liquid form). ORIGINAL PRESCRIPTION LABELS must accompany all prescribed medications (to include inhalers, Epi-pens, etc.) and will be kept at Windmill Day School and Camp with the medication. All medications/containers will be sent home daily.

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**Signature of person responsible for tuition**

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**Date**

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**Signature of Director/Administrator**

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**Date**

## Policy Sheet (Continued)

### **ALLERGEN POLICY:**

Windmill Day School & Camp ("Windmill") recognizes that students may suffer from potentially life-threatening allergies or intolerances to certain foods. Windmill is committed to an approach to the care and management of those students. Windmill's policy is **not a guarantee** of a completely allergen free environment, rather is a policy to minimize the risk of exposure.

Windmill is an allergen aware facility. In order to best facilitate this policy, Windmill strives to prohibit all products containing any nuts, including peanuts and tree nuts. This applies to all manufactured food products and homemade food products. However, this is **not a guarantee** that any snacks, served or purchased by Windmill or provided by staff, volunteers, or families does **not** include any allergens. If any non-compliant food item is discovered, it will be discarded immediately. Any foods that contain a label providing they "may" contain nuts, will be discarded if found on the premises. However, labels that provide a "product was manufactured in a facility that also processes food containing nuts", or similar wording, **are permissible**. Windmill has also been made aware of newer food labels (2019) that contain the phrase "may contain allergens" and/or "may contain other allergens due to shared production areas", but do not identify any specific allergen. Food items containing this label, provided they do not contain nuts or tree nuts in the list of ingredients, **are permissible**.

Windmill also prohibits any fish, shellfish and eggs from being brought onto the premises. However, this does **not** include products that may contain these items as part of its ingredients (ie cake, icing, mayonnaise, salad dressing, etc). Eggs may be used as part of cooking/baking lessons. Windmill requires that **all** food items brought on to the premises contain a detailed, **original** ingredient list attached to the packaging (to include "home-made" foods).

In the event your child has a food allergy, but you have made the decision that you want them to eat all snacks provided by Windmill, you are required to have your physician sign below acknowledging that they have reviewed and approve this policy for your child.

**PHYSICIAN'S NAME:**

**PHYSICIAN'S SIGNATURE/DATE**

### **LUNCH POLICY:**

Windmill Day School & Camp will provide both morning and afternoon snacks during the 2021-2022 Academic year. We require a packed, ready to eat, **NUT/FISH/EGG-FREE** lunch in a labeled box/bag for your student each day. Lunches will not be cooled/warmed by Windmill Staff to minimize handling and cross contamination; please pack for your child accordingly.

\_\_\_\_\_  
SIGNATURE OF PERSON RESPONSIBLE FOR PAYMENT OF TUITION

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF DIRECTOR / ADMINISTRATOR

\_\_\_\_\_  
DATE

**CIVIL RIGHTS COMPLIANCE  
PARENT AWARENESS**

IN ACCORDANCE WITH APPLICABLE FEDERAL AND STATE  
CIVIL RIGHTS LAWS AND REGULATORY REQUIRMENTS,  
YOU AS A RESIDENT OF THIS  
AGENCY, HAVE THE RIGHT:

- to be provided services at this agency and to be referred for services of other agencies without regard to your race, color, religious creed, disability, ancestry, national origin, Limited English Proficiency (LEP), age or sex.
- to file a complaint of discrimination if you feel you have been discriminated against on the basis of your race, color, religious creed, disability, ancestry, national origin, Limited English Proficiency (LEP), age or sex.

**COMPLAINTS OF DISCRIMINATION MAY BE FILED  
WITH ANY OF THE FOLLOWING:**

**Windmill Day School & Camp  
36 North Chapman Rd.  
Doylestown, Pa 18901**

**DEPARTMENT OF PUBLIC WELFARE  
BUREAU OF EQUAL OPPORTUNITY  
SOUTHEAST REGIONAL OFFICE  
1105B STATE OFFICE BUILDING  
1400 SPRING GARDEN STREET  
PHILADELPHIA, PA 19130**

**AMERICAN WITH DISABILITIES ACT DIRECTOR  
GOVERNORS OFFICE  
ROOM 238 MAIN CAPITOL  
HARRISBURG, PA 17120**

**U.S. DEPARTMENT OF HEALTH AND  
HUMAN SERVICES  
OFFICE FOR CIVIL RIGHTS  
SUITE 372, PUBLIC LEDGER BUILDING  
150 S. INDEPENDENCE MALL WEST  
PHILADELPHIA, PA 19106-9111**

**PA HUMAN RELATIONS COMMISSION  
711 STATE OFFICE BUILDING  
1400 SPRING GARDEN STREETS  
PHILADELPHIA, PA 19130**

\_\_\_\_\_  
PARENT/ GUARDIAN SIGNATURE                      DATE

\_\_\_\_\_  
STAFF SIGNATURE    DATE

# WINDMILL DAY SCHOOL 2021-2022 SCHOOL CALENDAR

WEEK OF AUGUST 23-AUGUST 27	CAMP WEEK FOR ALL STUDENTS/CAMPERS *LIMITED AVAILABILITY"
MONDAY, AUGUST 30	FIRST DAY OF SCHOOL FOR OUR 2021-2022 ACADEMIC YEAR
FRIDAY, SEPTEMBER 3	SCHOOL CLOSED
MONDAY, SEPTEMBER 6	LABOR DAY - SCHOOL HOLIDAY
TUESDAY, SEPTEMBER 7	ROSH HASHANAH- SCHOOL HOLIDAY
THURSDAY, SEPTEMBER 16	YOM KIPPUR – SCHOOL HOLIDAY
FRIDAY, OCTOBER 29	EARLY DISMISSAL- 1:00 PM- PROFESSIONAL DEVELOPEMENT
TUESDAY, NOVEMBER 2	ELECTION DAY-SCHOOL CLOSED PROFESSIONAL DEVELOPEMENT
WEDNESDAY, NOVEMBER 24	EARLY DISMISSAL – 1:00 PM
THURSDAY, NOVEMBER 25	THANKSGIVING RECESS - SCHOOL HOLIDAY
FRIDAY, NOVEMBER 26	THANKSGIVING RECESS - SCHOOL HOLIDAY
THURSDAY, DECEMBER 9	EARLY DISMISSAL - 1:00 PM PROFESSIONAL DEVELOPEMENT
THURSDAY, DECEMBER 23	WINTER RECESS - SCHOOL HOLIDAY
FRIDAY, DECEMBER 24	WINTER RECESS - SCHOOL HOLIDAY
THURSDAY, DECEMBER 30	WINTER RECESS - SCHOOL HOLIDAY
FRIDAY, DECEMBER 31	WINTER RECESS - SCHOOL HOLIDAY
MONDAY, JANUARY 17	MARTIN LUTHER KING, JR DAY – SCHOOL HOLIDAY
FRIDAY, FEBRUARY 18	SCHOOL CLOSED- PROFESSIONAL DEVELOPEMENT
MONDAY, FEBRUARY 21	PRESIDENTS' DAY - SCHOOL HOLIDAY
THURSDAY, MARCH 10	EARLY DISMISSAL- 1:00 PM PROFESSIONAL DEVELOPEMENT/CONFERENCES
THURSDAY, MARCH 17	EARLY DISMISSAL- 1:00 PM PROFESSIONAL DEVELOPEMENT/CONFERENCES
THURSDAY. APRIL 14	SCHOOL CLOSED-PROFESSIONAL DEVELOPEMENT/CONFERENCES
FRIDAY, APRIL 15	SPRING RECESS-SCHOOL HOLIDAY
MONDAY , APRIL 18	SPRING RECESS- SCHOOL HOLIDAY
FRIDAY, MAY 27	SCHOOL CLOSED- PROFESSIONAL DEVELOPEMENT
MONDAY, MAY 30	MEMORIAL DAY – SCHOOL HOLIDAY
THURSDAY, JUNE 9	GRADUATION EXERCISES (11:00 AM)
FRIDAY, JUNE 10	LAST DAY OF 2021-2022 ACADEMIC YEAR
MONDAY, JUNE 13	FIRST DAY OF SUMMER CAMP 2022
MONDAY, JULY 4	INDEPENDENCE DAY SCHOOL/CAMP HOLIDAY

\*\*\*\*I HAVE READ AND UNDERSTAND THE WINDMILL 2021-2022 SCHOOL CALENDAR\*\*\*\*

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

PLEASE NOTE: FULL TUITION IS DUE FOR ALL DESIGNATED SCHOOL HOLIDAYS,  
EARLY DISMISSALS AND ANY WEATHER AND/OR EMERGENCY DAYS.  
WINDMILL DAY SCHOOL RESERVES THE RIGHT TO ALTER THIS CALENDAR.

# CHILD HEALTH REPORT

(55 PA CODE §§3270.131, 3280.131 AND 3290.131)

Parent/Provider fill in this part.

CHILD'S NAME: (LAST)	(FIRST)	PARENT/GUARDIAN:
DATE OF BIRTH:	HOME PHONE:	ADDRESS:
CHILD CARE FACILITY NAME:		
FACILITY PHONE:	COUNTY:	WORK PHONE:
<input type="checkbox"/> I authorize the child care staff and my child's health professional to communicate directly if needed to clarify information on this form about my child.		
PARENT'S SIGNATURE:		

Parents may write immunization dates; health professional should verify and complete all data.

DO NOT OMIT ANY INFORMATION								
This form may be updated by a health professional. Initial and date any new data. The child care facility needs a copy of the form.								
HEALTH HISTORY AND MEDICAL INFORMATION PERTINENT TO ROUTINE CHILD CARE AND DIAGNOSIS/TREATMENT IN EMERGENCY (DESCRIBE, IF ANY):								
<input type="checkbox"/> NONE								
DESCRIBE ALL MEDICATION AND ANY SPECIAL DIET THE CHILD RECEIVES AND THE REASON FOR MEDICATION AND SPECIAL DIET. ALL MEDICATIONS A CHILD RECEIVES SHOULD BE DOCUMENTED IN THE EVENT THE CHILD REQUIRES EMERGENCY MEDICAL CARE. ATTACH ADDITIONAL SHEETS IF NECESSARY.								
<input type="checkbox"/> NONE								
CHILD'S ALLERGIES (DESCRIBE, IF ANY):								
<input type="checkbox"/> NONE								
LIST ANY HEALTH PROBLEMS OR SPECIAL NEEDS AND RECOMMENDED TREATMENT/SERVICES. ATTACH ADDITIONAL SHEETS IF NECESSARY TO DESCRIBE THE PLAN FOR CARE THAT SHOULD BE FOLLOWED FOR THE CHILD, INCLUDING INDICATION OF SPECIAL TRAINING REQUIRED FOR STAFF, EQUIPMENT AND PROVISION FOR EMERGENCIES.								
<input type="checkbox"/> NONE								
IN YOUR ASSESSMENT, IS THE CHILD ABLE TO PARTICIPATE IN CHILD CARE AND DOES THE CHILD APPEAR TO BE FREE FROM CONTAGIOUS OR COMMUNICABLE DISEASES?								
<input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, PLEASE EXPLAIN YOUR ANSWER:								
HAS THE CHILD RECEIVED ALL AGE APPROPRIATE SCREENINGS LISTED IN THE ROUTINE PREVENTIVE HEALTH CARE SERVICES CURRENTLY RECOMMENDED BY THE AMERICAN ACADEMY OF PEDIATRICS? (SEE SCHEDULE AT <a href="http://WWW.AAP.ORG">WWW.AAP.ORG</a> )			<b>NOTE BELOW IF THE RESULTS OF VISION, HEARING OR LEAD SCREENINGS WERE ABNORMAL. IF THE SCREENING WAS ABNORMAL, PROVIDE THE DATE THE SCREENING WAS COMPLETED AND INFORMATION ABOUT REFERRALS, IMPLICATIONS OR ACTIONS RECOMMENDED FOR THE CHILD CARE FACILITY.</b>					
			VISION (subjective until age 3)					
			HEARING (subjective until age 4)					
			LEAD					
<b>RECORD DATES OF IMMUNIZATIONS BELOW OR ATTACH A PHOTOCOPY OF THE CHILD'S IMMUNIZATION RECORD</b>								
IMMUNIZATIONS	DATE	DATE	DATE	DATE	DATE	COMMENTS		
HEP-B								
ROTAVIRUS								
DTAP/DTP/TD								
HIB								
PNEUMOCOCCAL								
POLO								
INFLUENZA								
MMR								
VARICELLA								
HEP-A								
MENINGOCOCCAL								
OTHER								
MEDICAL CARE PROVIDER:				SIGNATURE OF PHYSICIAN, CRNP OR PHYSICIAN'S ASSISTANT				
ADDRESS:				TITLE:				
			PHONE:	LICENSE NUMBER:	DATE FORM SIGNED:			