

Small Wonders

Early Learning Center

Enrollment Form Check List

Client Name: _____

Parent: _____

1. Enrollment Form _____
2. Updated Immunization Records _____
3. Health Statement Signed by Medical Provider _____
4. Permission to Release _____
5. Field Trip Permission Form _____
6. Permission to Photograph (For facility use) _____
7. Consulting with Physician or RN _____
8. Parental Rights Statement _____
9. Received Policy and Procedures Manual _____
10. Received Disaster Plan _____