



HEALTH STATEMENT FORM

Before your child may attend The Circle C Child Development Center, you must submit a signed copy of this form or one provided by your physician prior to your child's first day of school.

HEALTHCARE PROFESSIONAL'S STATEMENT

_____ has been examined by me and found to be free of all contagious diseases and is physically able to participate in all school activities.

Restrictions (if any) include:

Physician's Signature

Date