

Kindergarten Check List

- _____ Immunization Record
- _____ **OR** doctor authorized refusal of immunizations
- _____ State Certified Birth Certificate
- _____ Physical
- _____ Vision Evaluation
- _____ Enrollment/Health Data Form
- _____ Commitment/Publicity Release Form
- _____ Registration Fee (\$150.00)
- _____ Emergency Response Form (for Asthma or allergies) if needed