



Home & Family Life Department
Registration Packet Cover Letter

Dear Parent/Guardian(s);

In order for the teacher to know about your child's development and to insure a safe and healthy environment for the children, the attached forms must be filled out and returned to the school **ON OR BEFORE THE CHILD'S FIRST DAY OF SCHOOL.**

1. INFORMATION FORM

This information helps the teacher know about your child and his/her family. Information on this form is kept confidential with the teacher and Bates staff.

2. BATES REGISTRATION FORM

When you enroll your child(ren) in a Bates affiliated cooperative preschool, you are also enrolling yourself in a Bates parent education class. This form registers the parent/guardian who works in the preschool classroom as a Bates student. Use only one form per family and fill in the adult's information, social security number and birth date.

3. CONSENT FOR EMERGENCY MEDICAL CARE

Should an injury occur, the school needs your consent to provide emergency care for your child if you cannot be contacted. For your child's well-being and the teacher's protection, we must have this form before your child can be left at school.

4. CHILD RELEASE FORM

This form lets us know who has your permission to pick up your child. Your child will be released only to those designated on this form.

5. CERTIFICATE OF IMMUNIZATION

Washington State law requires that all children admitted to preschool be adequately immunized. To be complete, your child should have had:

4 doses of DTP (Diphtheria, Tetanus, Pertussis)

3 doses of Polio (OPV/ IPV)

1 MMR (Measles, Mumps, Rubella) - given on or after the first birthday

4 doses of Hib (Homophiles influenza type B) – if only one was received, it must have been given after 15 months of age.

3 doses of Hep B (Hepatitis B)

1 dose Varicella (Chickenpox) to be given on or before the child's 1st birthday (4 day grace period) or parental documentation of having had the disease (yes/no and approximate date), lab evidence of immunity

You must provide month, day and year for each dose received (on front of immunization form).

OR

evidence that your child is exempt for personal, medical or religious reasons (on the back of the immunization form).

Information about immunizations can be obtained from: **Tacoma Pierce County Public Health Information Line – 798-2987 or <http://www.tpchd.org/page.php?id=2>**

Thank you for your cooperation in filling out these forms. When completed they are to be returned to your child's preschool.