

# Coppell Child Development Center Annual Physicians Statement and Immunization Record

Child's Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_  
Child's Height and Weight: \_\_\_\_\_ Sex: \_\_\_\_\_  
Name of Child's Physician: \_\_\_\_\_ Phone #: \_\_\_\_\_  
If different, Physician's Emergency Phone #: \_\_\_\_\_  
Address, City, Zip: \_\_\_\_\_

**Statement of Child's Special Problems or Special Care Needs:**

(Including but not limited to allergies, existing illness, previous serious illness and injuries, hospitalizations during the last 12 months and any medications prescribed for continuous, long-term use.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**To the Physician:**

This Child has been enrolled in Coppell Child Development Center, "CCDC" meets for six hours per day. The daily programs involve both vigorous and quiet indoor and outdoor play, including the use of climbing equipment. In your opinion, is the child physically and emotionally able to participate in a program like the one described above? If you agree with this statement, please indicate with signature.

Physician's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Minimum State Vaccine and Vision/Hearing Screening Requirements for Texas Children:**

All Students of Coppell Child Development Center must meet the "Minimum State Vaccine Requirements for Texas Children." A child / student must meet all the immunization requirements shown for an age group upon first entering the age group. All immunizations should be completed by the first date of attendance. Any document containing a record of the child's immunizations will be acceptable, provided it has been validated by a physician or public health official. The month, day and year that the vaccination was received must be recorded on all school records. Any exemption to Immunization Requirements must meet those described in the Texas Administrative Code. If your child meets the requirements for such an exemption, you must provide a written signed statement of such. A copy of the "Minimum State Vaccine Requirements for Texas Children" will be provided upon request.

Additionally, The Special Senses and Communication Disorders Act, Texas Health and Safety Code, requires a screening or a professional examination for possible vision and hearing problems for each child who turns four, five or six years old during the school year. CCDC is required to have a copy of this screening on file within 120 days of the child's birthday.

**Please attach a record of immunizations to this form and an individual hearing and vision screening for children who will be four, five or six years old during this school year.**