**Child Record Summary** 

"R" Children Preschool Semester Lab Supervisor Emergency Contact Child's Allergies/Health Information Immun. Insurance Indemni-Photo Parent Parent Involve-Immun. Information Concerns Name Forms Record Deficient Inform. fication Consent Involvement Completed Clause Provided Option Other Information/ ment Signed X=completed Option Comments X=completed List number X=completed X=completed List List them X=have number