

Lake Hills Montessori – Tulsa
Well Child Statement

Return to: Jodie Whitman, Director
10901 S Yale Ave.
Tulsa OK 74137
(918) 296-9936

Student Name: _____

Known Allergies:

Regular Medication Taken:

Other Medical Concerns/Considerations:

This is to certify that the above named individual has been examined by me on _____ and is found to be in good health and able to attend school, as well as participate in age appropriate physical activities.

Provider's Signature

Date

Provider's Address & Phone

www.lakehillsmontessori.com

