

## **Child Health Statement**

\_\_\_\_\_ is, to the best of my knowledge, in good health.  
(Print student's name)

I will be responsible for my child's health while he/she is in Summer Activity Club (SAC). Health records and immunization records are up to date and are on file in the school office of my child's home school.

I will provide lunch for my child daily. Please be advised that, on occasions, I may choose to provide a snack for my child and not use the one that Summer Activity Club provides.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date