



St. Jude's Preschool

Dianna Grant
Teacher and Registrar

4100 Lyell Road
Rochester, New York

Phone: 585-426-1872
Fax: 585-429-5111

MEDICAL STATEMENT

Dear Parents,

The enclosed medical statement and immunization record must be completed and signed by your child's physician. We are required by the New York State Office of Children and Family Services to have a copy of this form on file by the beginning of the new school year. Please send or deliver a copy of the completed form to the school by Tuesday, September 6th.

If the record is being faxed, please send it to 585-429-5111, Attention: Preschool.

If you have any questions, please call the office at 426-1872.

Thank you.