

| ITEM | INFANT | TODDLERS | 3 YEARS AND UP |
|-----------------------------------|---------------|-----------------|-----------------------|
| Health form | X | X | X |
| Emergency Contact Form | X | X | X |
| Crib sheet and crib sized blanket | X | X | X |
| Change of clothes | X | X | X |
| Diapers and wipes | X | X | |
| Pacifier | X | X | |
| Feeding schedule | X | | |
| Bottles, caps and food | X | | |
| Cereal | X | | |
| Sunscreen (seasonal) | X | X | X |
| IEP/IFSP | If applicable | If accplicable | If applicable |