

# Vaccination Record Request for Daycare Admission

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

To Whom It May Concern,

I am writing to formally request a copy of my child's vaccination records required for their admission to [Daycare Name]. In order to complete the enrollment process, it is essential that I provide proof of their immunizations.

Child's Name: [Child's Full Name]

Date of Birth: [Child's Date of Birth]

Parent/Guardian Name: [Your Full Name]

Please send the vaccination records to my email or home address listed above at your earliest convenience. If there are any forms or fees required to fulfill this request, kindly let me know.

Thank you for your assistance.

Sincerely,

[Your Name]