



sproutlings

PEDIATRIC DAY CARE & PRESCHOOL
MASONIC COMMUNITIES

PPEC Application

Located in Kosair Charities Center on
Masonic Communities' Louisville Campus

3800 Tom Larimore Lane • Masonic Home, KY 40041
P: 502.753.8222 • TF: 866.764.6631 • F: 502.753.8223
SproutlingsDayCare.com

CHILD'S INFORMATION

Child's Name: _____ DOB: _____ Female Male

Address: _____

City: _____ State: _____ Zip: _____

Primary Diagnosis: _____

Secondary Diagnosis: _____

Allergies: _____

Medications: _____

Diet: _____

Additional Information: _____

FAMILY INFORMATION

Parent/Guardian: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone Number(s): _____

PHYSICIAN INFORMATION

Pediatrician/PCP: _____ Phone: _____

(Please attach a physician's written order prescribing services at Sproutlings Pediatric Day Care and Preschool)

INSURANCE INFORMATION

Primary Insurance Carrier: _____ Phone: _____

Secondary Insurance Carrier: _____ Phone: _____

(Please copy BOTH sides of insurance card and attach to this form)

Parent/Guardian signature: _____ Date: _____

**Please send this completed form and payment for the \$100 non-refundable application fee to:
Sproutlings, 3800 Tom Larimore Lane, Masonic Home, KY 40041.**