

**Child Care Enrollment
Parent Acknowledgement Form**

Child's Full Name: _____

Date of Birth: _____

Enrollment Date: _____

Parent/Guardian Information

Parent/Guardian Name: _____

Relationship to Child: _____

Phone Number: _____

Email Address: _____

Acknowledgements

Please read and initial each section to confirm your understanding and agreement:

☐ I have received, read, and understood the Parent Handbook, including policies on attendance, illness, discipline, and late pick-up.

☐ I understand that my child must be kept at home if showing signs of illness and that the center follows all health and safety protocols.

☐ I authorize the childcare center to take appropriate action in case of an emergency and understand I will be contacted as soon as possible.

☐ I understand that the center uses positive guidance and regulation strategies to support my child's development and behavior.

☐ I give / ☐ I do not give permission for my child's photo to be taken for internal use (e.g., classroom displays, newsletters).

☐ I understand the fee structure, payment schedule, and late payment policies.

☐ I understand that a written notice is required 30 days in advance for withdrawal from the program.

Signature

I acknowledge that I have read and understood the above information and agree to comply with the policies of the Little Hands Montessori school & Daycare.

Parent/Guardian Signature: _____ Date: _____

Staff Signature (if applicable): _____ Date: _____