

ACKNOWLEDGEMENT FORM

Child's Name _____

I, _____ (Parent's/Guardian's Name)
have read and agree to the policies outlined by Open Arms Child Care Center regarding
the following:

- ◇ Child Guidance Policy
- ◇ Procedures for Emergency and Illness
- ◇ Plan for Ill Children
- ◇ Plan for Administration of Medication
- ◇ Toileting and Diapering Policy
- ◇ Toddler Biting Policy
- ◇ Referral Services and Termination Policy
- ◇ Field Trip Policy
- ◇ I give permission for _____
(Child's name)
to take walks on Open Arms/Christ Lutheran Church property.
- ◇ Tuition and Withdrawal Policies

(Parent's/Guardian's Signature)

(Date)

Valid for one year from date of signature.