



## Acknowledgement of Receipt (Please Check)

<b>Form Title:</b>	<b>Received</b>	<b>Did Not Receive</b>
Contract		
Parent Handbook		
Rules & Regulations		
Sick Child Policy		

**Other (please list):**


**By signing below, I acknowledge receipt of the above listed forms, and agree to abide by the terms and policies as outlined in them.**

\_\_\_\_\_

**(Parent or guardian)**

**(Date)**

\_\_\_\_\_

**(Parent or Guardian)**

**(Date)**

\_\_\_\_\_

**(Director)**

**(Date)**