

Childs name \_\_\_\_\_ Date: \_\_\_\_\_  
Parents Name(s) \_\_\_\_\_ Email address: \_\_\_\_\_

- 1) **Parent handbook:** I have read and fully understand Howell Early Learning Center's parent handbook including curriculum, Sick/Illness Policy, Emergency Policy and Safety Policy.

Signature \_\_\_\_\_ Date \_\_\_\_\_

- 2) **Water Play:** I give my permission for my child to participate in water activities, such as water tables and sprinklers.

Signature \_\_\_\_\_ Date \_\_\_\_\_

- 3) **Photo Release:** I give my permission to Howell Early Learning Center to use, reproduce or publish any or part of my child's photographs.

Signature \_\_\_\_\_ Date \_\_\_\_\_

- 4) **Walks:** I give my permission to Howell Early Learning Center to take my on walking trips within the center's neighborhood.

Signature \_\_\_\_\_ Date \_\_\_\_\_

- 5) **Field Trips:** I understand that field trips are a part of the Howell Early Learning Center's Curriculum. I understand that transportation will be provided by the LETS bus and that I will be notified before the trip takes place. Additional fees will apply.

Signature \_\_\_\_\_ Date \_\_\_\_\_

- 6) **Attendance:** I agree to sign my child in and out on a daily basis.

Signature \_\_\_\_\_ Date \_\_\_\_\_

- 7) **Registration and tuition:** I understand that a 50.00 non-refundable registration fee and first weeks tuition is due at the time of enrollment.

Signature \_\_\_\_\_ Date \_\_\_\_\_

- 8) **First Aid:** I give my permission to Howell early Learning Center to apply: Sunscreen, Insect repellent, Diaper cream (ex Desitin, Balmex) or baking soda (ex for bee stings)

Signature \_\_\_\_\_ Date \_\_\_\_\_

- 9) **Licensing:** I have been informed of the state's requirements regarding licensing documentation:

-Center maintains a licensing notebook of all inspections, special investigation reports and all related material.

-The notebook is available for parents to review during normal business hours.

-Licensing inspection and special investigation reports from the past 2 years are available on the Bureau of Children and Adult Licensing website at [www.michigan.gov/michildcare](http://www.michigan.gov/michildcare)

Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*Would you like to receive email copies or paper copies of our newsletters, calendars and other center information?

Email \_\_\_\_\_ Paper \_\_\_\_\_

Childs name \_\_\_\_\_ Date: \_\_\_\_\_

Parents Name(s) \_\_\_\_\_ Email address: \_\_\_\_\_

\*\*Would you like to receive email copies or paper copies of our newsletters, calendars and other center information?

Email \_\_\_\_\_ Paper \_\_\_\_\_