

Parent/Guardian

Acknowledgment and Authorization Signatures

Please initial each statement to indicate your acceptance, sign and print your name, and date the form at the bottom. Items A and B are mandatory for enrollment purposes.

Initials are required for A and B

A. \_\_\_\_\_ I have read ALL of the information in the Parent Handbook and wish my child to be enrolled in the program offered by Cozy Corner at Olney Central College. My initials reflect my agreement to the information and procedures included in the handbook.

B. \_\_\_\_\_ If I am delayed in picking up my child at the appropriate time due to an emergency, I understand that I am responsible for contacting the Center immediately. If no contact is made by the closing of Cozy Corner (4:30) the emergency contacts will be notified and asked to pick up the child. If emergency contacts cannot be reached, the Olney Police Dept. will be notified and asked to help locate parents/emergency contacts. A fee of \$20.00 per half hour will accrue beginning at 4:31 per child.

Initials for C and D are optional

C. \_\_\_\_\_ my initials authorize personnel at Cozy Corner at Olney Central College to use topical products on my child/ren. I understand I must provide the Center with specific written application instructions for each child.

D. \_\_\_\_\_ my initials authorize personnel at Cozy Corner at Olney Central College to take pictures of my child/ren. I understand these pictures may be published or released to the news media.

Signature of Parent/Guardian \_\_\_\_\_

Printed Name of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Names and ages of all children attending Cozy Corner

_____	_____
_____	_____
_____	_____