



OUR SAVIOR EARLY LEARNING CENTER

PERSON ASSUMING FINANCIAL RESPONSIBILITY:

BY SIGNING THIS, YOU ACKNOWLEDGE, UNDERSTAND, AND AGREE TO COMPLY WITH THE STANDARD RATE/LATE FEE/NSF FEE POLICY:

PRINTED NAME: _____

ADDRESS: _____

TELEPHONE: _____

PARENT SIGNATURE: _____

MANAGEMENT SIGNATURE: _____

OSELC EMERGENCY PROCEDURES PERMISSION FORM

IN THE EVENT THAT AN EMERGENCY SITUATION SHOULD ARISE WITH MY CHILD, I, _____, AUTHORIZE OUR SAVIOR EARLY LEARNING CENTER TO ADMINISTER EMERGENCY PROCEDURES INCLUDING ANY AND ALL LIFE SAVING EFFORTS. THIS ALSO APPLIES TO SITUATIONS WHERE I, OR THE EMERGENCY CONTACT PERSON OR PERSONS NAMED FOR MY CHILD ARE UNREACHABLE.

PARENT NAME: _____

PARENT SIGNATURE: _____

ACKNOWLEDGEMENT AND RECEIPT OF PARENT HANDBOOK

I HEREBY ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF THE OSELC PARENT HANDBOOK. THE PARENT HANDBOOK WILL SERVE AS A GUIDE TO THE POLICIES OF OUR SAVIOR EARLY LEARNING CENTER.

I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO READ THE HANDBOOK IN ITS ENTIRETY AND THAT I FURTHER AGREE TO ABIDE BY ITS POLICIES.

WHEN NECESSARY, POLICIES AND INFORMATION CONTAINED WITHIN THE HANDBOOK MAY BE CHANGED, ADDED TO, OR DELETED WITHOUT NOTICE.

FURTHER, I UNDERSTAND THAT THIS HANDBOOK REPLACES ANY AND ALL PREVIOUS HANDBOOKS OR MATERIAL.

PARENT SIGNATURE: _____ DATE: _____