PROGRAM INFORMATION/PARENT AGREEMENT SIGNATURE PAGE

| the parent/guardian | |
|--|-----------------------------|
| | , have received, |
| read and understand the program information payments and the Emergency Operations Plan | , 01 |
| to review the parent information board in the agree to update the emergency contact form | • |
| authorization form every 6 months and when | • |
| occur. | |
| The following adults are allowed to pick my ch (INCLUDE PARENTS/GUARDIANS) | nild up from A Kid's Place: |
| | |
| | |
| | |
| Parent/Guardian Signature | Date |
| Email | |
| address | |
| Employee Signature | Date |

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