

ADMISSION AGREEMENT

We ask that all Riverbend Montessori Child Care and Out-of-School Care parents sign and return this admission agreement. (This agreement also covers other areas not previously mentioned in the handbook - please read carefully).

I, _____, PARENT/GUARDIAN of _____

have received, read, understood and accepted the policies written within this handbook, and accept the responsibilities of myself as a parent in regards to: the payment of fees to be received on or before the fifth day of the month in which my child is registered.

the following of procedures as outlined under the fees policy page with regards to supplying post-dated cheques, notice of termination; **no fee reductions for holidays and absences**; retention of receipts given and payment of applicable additional fees.

the picking up of my child prior to the 6:00 pm closing time.

notifying the centre when my child will be absent or needs to be picked up by someone other than myself.

providing alternate care for my child on the days he/she is ill; or becomes ill while at school or the centre.

Furthermore, as a parent of the Riverbend Montessori Child Care and Out-of-School Care, I agree to:

Meet with the Child Care staff should they have concerns regarding my child's behaviour or conduct.

Allow Riverbend Montessori Child Care staff to obtain medical aid for my child in the event of an emergency, realizing that this may involve the transportation of my child via a staff's personal vehicle or an ambulance.

Allow my child to be photographed or video taped for the purpose of internal (centre only) interest.

I have read, understood and accept the centre's responsibilities and policies in regards to discipline, illness, administration of medication, arrival and dismissing procedures and emergency evacuations.

DATE _____ PARENT'S SIGNATURE _____

Staff Signature for Riverbend Montessori Child Care Centre _____