



REGISTRATION SIGNATURE PAGE

PARENT HANDBOOK

PARENT HANDBOOK: By signing this page, I acknowledge I have read in its entirety, the Sunset Christian Preschool Family Handbook. I further acknowledge that I understand and agree to follow the policies set forth in this Handbook, and that I understand what is expected of me as a parent/guardian.

Initials:

LIMITED POWER OF ATTORNEY FOR EMERGENCY MEDICAL CARE AUTHORIZATION

I hereby give my permission for my child above to be given emergency treatment to include first aid and/or CPR by a trained and qualified staff member or the local rescue unit. I further authorize and consent to medical, surgical, and hospital care, treatment, and procedures to be performed for my child by a licensed physician or hospital when deemed immediately necessary or advisable to safeguard my child's health in the event I cannot be contacted. I waive my right of informed consent to such center treatment should an accident and/or illness require immediate medical attention. I acknowledge it is my responsibility to keep this medical emergency information and all other information concerning my child current throughout my child's enrollment at Sunset Christian Preschool. I authorize the sharing of necessary information included in this document with staff that need to know how to provide a safe and healthy environment for this child. The undersigned accepts all financial responsibility for any and all care/services rendered and indemnifies UPPC/SCP therefore. Further, the undersigned releases UPPC/SCP from any and all liability arising out of any act or omission hereunder.

Parent/Guardian Signature: Date:

NON DISCRIMINATION STATEMENT

The admission policy of Sunset Christian Preschool does not discriminate based on a child's race, color, religion, sex, national or ethnic origin. We are a Christian preschool and will share the love of Jesus to all children in our program.

PERMISSION TO PARTICIPATE IN CENTER ACTIVITIES

- I hereby give permission for my child to use all the play equipment and participate in all the activities of the center and to leave the premises under the direct supervision of a staff member for neighborhood walks or field trips.

Parent/Guardian Signature: Date:

CONFIRMATION SIGNATURE

I acknowledge by signing below that I am the legal parent/guardian of the child named above and to the best of my knowledge the above information in this SCP Enrollment Application form is accurate and complete.

Parent/Guardian Name (print please):

Legal Signature:

Date: