

By signing below, I acknowledge that I have received Smart Start Learning Center's Parent Handbook and have read and understand their center rules and policies. I release Smart Start Learning Center from any obligation to pay any medical expenses that may occur. \*Both parents are required to sign this form.

Name(s) of Child(ren) enrolled: \_\_\_\_\_

First and Last Name of Parent(s): \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Primary caregiver may sign in place of secondary caregiver if secondary caregiver is not available to sign. By signing below, parents/guardian is accepting all responsibility and liability that may be brought about by the alternate or secondary parent/guardians.

I, \_\_\_\_\_, acknowledge and accept all legal responsibility and liability that may be brought up by my child's father/mother (Secondary Caregiver). I agree to the terms outlined in Smart Start's parent handbook and give consent for Smart Start to provide care for my child.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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This waiver allows for your child(ren)'s picture to be posted on Smart Start Learning Center's Facebook page, the page is public and is available for anyone to view. Please initial on the appropriate line. (Select only one)

I will NOT allow my child(ren)'s pictures on the Smart Start Learning Center's Facebook page. \_\_\_\_\_ initial

I will allow my child(ren)'s pictures on the Smart Start Learning Center's Facebook page. \_\_\_\_\_ initial

I will allow my child(ren)'s pictures on the Smart Start Learning Center's Facebook page. But I will NOT allow their faces to be shown in any of the pictures. \_\_\_\_\_ initial

I will allow my child(ren)'s pictures to be displayed in their classroom. Yes \_\_\_\_\_ No \_\_\_\_\_

Parent or Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_