



**Sheets Memorial Christian Preschool
Statement of Policy Acceptance**

Please initial each of statements listed below that pertain to your child and then sign at the bottom.

- _____ I hereby give permission to SMCP for my child to participate in a walking trip and/or a buggy ride.
- _____ I hereby give permission to SMCP for my child to participate in developmentally appropriate supervised activities outside of the fenced playground.
- _____ I also give permission for my child’s picture to be used on the school website and in school advertising.
- _____ I have received a copy of the summary of North Carolina Care Laws and Rules.
- _____ I understand by opting out of the food programs provided by SMCP means the facility does not have to provide food or beverages to my child. As the parent/guardian I am aware nutritional standards may not be met.
- _____ I have received a copy of the SMCP Family Handbook, which includes policies on Discipline and behavior Management, Aggression, SIDS, Nutrition Standards, Prevention of Shaken Baby Syndrome, and Abusive Head Trauma.
- _____ I have included any and all court custody documents pertaining to this student.
- _____ I understand that these authorizations are valid for the duration of my child’s enrollment at SMCP.

I, the undersigned parent/guardian of (Print child’s full name) _____, do hereby state that I have received a copy of SMCP Family Handbook and policies and any questions asked have been answered.

Date of Child’s Enrollment

Signature of Parent/Guardian

Printed Name of Parent/Guardian

Date