**HAVENWOOD PRESCHOOL CENTER**

**Return to**

**Preschool Office**

**By June 1st**

**AGREEMENT STATEMENT**

**SCHOOL CALENDAR**

 **I have received the Havenwood Preschool calendar, understand the contents and acknowledge that it is subject to change at any time during the year.**

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARENT HANDBOOK**

I have received the Parent Handbook which includes all policies and procedures as set forth by the Havenwood Preschool Center. I understand its content and will abide by all policies as well as my signed registration contract.

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PRE-ENTRY EVALUATION REQUIREMENT**

All guardians/parents are required to submit a copy of the results of any special testing, evaluations, and/or IEP’s of students by August 1st. This requirement does not necessarily preclude admission to Havenwood. This information is required in order to provide a broader profile of the student’s individual needs in order to determine whether Havenwood Preschool has the resources to meet those needs.

I agree to comply with disclosing all IEP’s, medical, and neurological evaluations of my child(ren) by August 1st.

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PERMISSION SLIP**

My child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, has my permission to go on short nature walks (applies to all students) and field trips (kindergarten only) planned by Havenwood Preschool Center during the school year. I understand that I will be notified of each kindergarten field trip (date, time, place), and that my child will be buckled in seat belts.

 Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I have received & read the Maryland Guide to Regulated Child Care.**

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_