



# LEWINSVILLE MONTESSORI

## Agreements

1. Lewinsville Montessori School (LMS) agrees to notify the parent(s)/guardian(s) whenever the child becomes ill and the parent(s)/guardian(s) will arrange to have the child picked up as soon as possible if so requested by LMS.
2. The parent(s)/guardian(s) authorize LMS to obtain immediate medical care if any emergency occurs when the parent(s)/guardian(s) cannot be located.\*
3. The parent(s)/guardian(s) authorize LMS within 24 hours or the next business day after their child(ren) or any member of the immediate household has developed any reportable communicable disease, as defined by the State Board of Health except for life threatening diseases which must be reported immediately.
4. The parent(s)/guardian(s) agree to read the Infection Control Policy, and agree to abide by them for the protection of their child(ren) as well as the other children and staff members at LMS.
5. Photo Use Policy (strike through if you do not agree) I authorize LMS to use photos, facsimiles, videos and likenesses of my child(ren) in school publications, advertisements, website. No reference will be made to name or address and these will never be used for resale.
6. Photo Transmission (strike through if you do not agree) I authorize LMS to transmit photos, facsimiles, videos and likenesses to us, the parent(s)/guardian(s) via e-mail and text message.
7. Rules, Regulations and Policies, as outlined in the Parent Handbook, are understood and accepted as a condition of enrollment.
8. I understand that it is my sole responsibility to update and/or keep LMS Administration informed of any changes to information (i.e. contact, insurance, transportation).

## Signatures

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**Parent(s) or Guardian(s)**

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**Date**

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**Administrator of Lewinsville Montessori School**

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**Date**

*\*If there is an objection to the Center seeking emergency medical care, a statement MUST be submitted by the parent(s)/guardian(s) that states the objection and the reason for the objection*