Specific Acknowledgement Form
Chrysalis Christian Preschool

Child's name _____ _____
First Middle Last

Child's Birth Date_____

1. I acknowledge that I have received a copy of the Parent's Handbook/Operational Polices and I agree that I must abide by the policies and procedures as stated.

2. Chrysalis was recommended by _____

3. I understand the Registration and Supply fees are holding a position for my child in a class and that they are non-refundable fees.

4. I also understand that I must give **30 days written notice**, or pay one month tuition before withdrawing my child from this program. This does not apply to "summer only" students.

5. Immunizations:
   - ☐ I am excluding my child from the immunization requirements for reasons of conscience, including a religious belief. I have attached an official notarization affidavit form developed and issued by the Department of State Health Services. I understand this affidavit is valid for 2 years.
   - ☐ My child's immunization record is on file at _____(Public School) and all required immunizations and/or tuberculosis tests are current. Vision and Hearing screening records are also on file.
   - ☐ I have provided Chrysalis Christian Preschool a copy of my child's most current immunization record.

Parent's signature: _____ Date: _____

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