



347-916-0535
Kinderprepl@yahoo.com

Child Pickup Authorization

Name: _____

Address: _____

Relationship: _____

Phone: _____ Email: _____

Additional Persons who are authorized to pick up your child:

(1) Name: _____

Address: _____

Relationship: _____

Phone: _____ Email: _____

(2) Name: _____

Address: _____

Relationship: _____

Phone: _____ Email: _____

Any persons not authorized to pick up your child: _____

****Note: Any person unfamiliar to us will be required to show proof of identification. Under no circumstances will the child be released to anyone other than those listed above without written permission from the parent.**

Parent/Guardian Signature: _____ Date: _____

Home Address: _____ Phone: _____

Work Address: _____ Phone: _____

Parent/Guardian Signature: _____ Date: _____

Home Address: _____ Phone: _____

Work Address: _____ Phone: _____



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Kinderprep1@yahoo.com

Activity Authorization Form

I hereby grant permission for my child, _____,
to use the play equipment and to participate in all of the activities at Kinder Prep Montessori.

The parent/guardian makes the following exceptions:

I understand that riding toys, slides, large climbers, sandboxes and other toys are used on a regular basis.

I also understand that helmets, knee and elbow pads will not be provided by the caregiver, but will be required for activities such as bike-riding, roller blading, etc. These will be provided by the parent/guardian.

I will not hold the caregiver responsible for injuries incurred while using equipment at the center, provided the children are supervised and the equipment in is good repair.

Comments or concerns as noted by the parent/guardian: _____

Parent/Guardian Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____



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Sleeping and Napping Agreement

Child's Name: _____

I understand that, while under the care and supervision of Kinder Prep Montessori, my child will be napping on a mat in a designated area of the classroom.

Children will sleep without a pillow on clean sheets provided by the parents every Monday morning. Sheets will be returned to parent on the last day of the child's weekly schedule.

If my child is an infant, he/she will be placed on his/her back to sleep.

Authorization for Outdoor Activities

I understand that outdoors activities are a required part of Kinder Prep's daily schedule.

I give permission for my child to participate in these activities, which will occur at the school.

Parent/Guardian Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____



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Permission to Photograph

I, _____ give permission for Kinder Prep Montessori
 Parent or Guardian Name

to photograph my child, _____, for the following purposes:

Still Photographs:

Type of Use	Grant Permission	Deny Permission
Display in teacher's personal scrapbook		
Give photographs possibly containing your child's image to current clients		
Display in facility's scrapbook or bulletin boards, shown to current and prospective clients		
Post photos on facility's Facebook or Instagram page		
Facility Website (public, without child's name) *		

Video:

Type of Use	Grant Permission	Deny Permission
Give video to current parents via email or text		
YouTube, Facebook or other promotional video		
Facility Website (public, without child's name) *		

*Only first names and possibly last initials (in the event two or more children share the same first name) will be displayed on the Parents page of the facility website.

I understand that it is my responsibility to update this form in the event that I no longer wish to authorize one or more of the above uses. I agree that this form will remain in effect during the term of my child's enrollment.

Signed:

Parent/Guardian: _____

Date: _____

Parent/Guardian: _____

Date: _____



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Contract Agreement

I/We have received a copy of Kinder Prep Montessori's Terms, have read it, understand it, and agree to comply with it.

Child's Name: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____