

Prime Time Parent Handbook Signature Page

I have read and agree with all policies and information in the Prime Time Extended Learning Center Parent Handbook .

Prime Time has permission to photograph/video my child/family and use material in print and electronically for promotional material and training purposes: ____yes ____no

I authorize Prime Time to provide care for my child. In the event my child is injured or becomes seriously ill and I cannot be reached, I authorize the Prime Time staff to give and seek medical attention and I authorize any and all hospitalization, medical, dental and/or surgical treatment deemed advisable by the circumstances. ____yes ____no

Printed Name (first and last)

Signature

Date

NOTE: This form is required by State Law to complete the enrollment process.
It may be found under registration and submitted via the website at primetimeextendedlearningcenter.com.