

Parental Consent Form

By signing below, I agree to the following:

My child may participate in all trips and activities.
I will inform you in writing if my child has any restrictions.

My registration fee is non-refundable.

I permit Little Star preschool to use and publish photographs and video of me and/or my children in order to promote Little Star preschool and Oorah.

I give consent for any necessary medical care for my child while he/she is in Little Star's custody and I cannot be reached. If my child becomes seriously ill or injured, the emergency ambulance service will be called to the center, and the emergency paramedic attendant will decide whether to transport my child to the nearest hospital.

I agree to the fees and tuition exactly as stated.

Father's signature: _____

Date: _____

Little Star

a project of Congregation  Oorah

Mother's signature: _____

Date: _____