

LL Policy Acknowledgement by Parents

Dear Learning Leaf Parents,

By signing this form, you, as a Learning Leaf parent, acknowledge you have been made aware of Learning Leaf's:

- Hours of Operation
- Mission Statement
- Sources of Food and Meals Served
- Curricula & Activities
- Requirements for Enrollment
- Holiday Closures
- Inclement Weather Policy
- Learning Leaf's Sick Policy
- Tuition Payment Policy
- OSSE Required Documents including:
- Registration for Care Away From Home
- Medical Authorization
- Emergency Medical Treatment Authorization
- Travel Authorization
- Brightwheel Communication App
- Teacher Qualifications

Parent: _____

Child: _____

Date: _____