

**Mamaroneck Community Nursery School**

**EDUCATIONAL OBSERVATIONS PERMISSION**

Mamaroneck Community Nursery School (MCNS) is committed to the development and education of early childhood educators. As such, MCNS collaborates with other schools, agencies, and colleges in the area to facilitate observations for educational purposes by professional staff and/or students.

It may also be necessary for additional support staff, not employed by MCNS, to be present in a classroom for the benefit of a child enrolled in our programs. In all situations the confidentiality of our students and families will be maintained.

I hereby give permission to Mamaroneck Community Nursery School and/or Playgroup & Kid's Club to facilitate visitations and/or observations for educational purposes. And I am aware that there may be additional support staff for students in my child's classroom.

\_\_\_\_\_  
Print Parent/guardian Name

\_\_\_\_\_  
Parent/guardian signature

\_\_\_\_\_  
Child(ren) name

\_\_\_\_\_  
Date

**PARENT ACKNOWLEDGEMENT FORM**

I have received a copy of the School's Parent Handbook. I recognize and accept my responsibility to read and become familiar with its contents. I acknowledge it is designed to provide general information relative to various policies and procedures. I also understand that the contents of this handbook may change. Further, I understand that the School reserves the right to add, delete, or modify the contents of the handbook at any time and for any reason. I also acknowledge that:

**I accept the contents of the handbook and agree to abide by the information set forth.**

Please sign below that you have read and accept the contents of the parent handbook.

\_\_\_\_\_  
Print Parent/guardian Name

\_\_\_\_\_  
Parent/guardian signature

\_\_\_\_\_  
Child(ren) name

\_\_\_\_\_  
Date

**School Wide Directory**

In early October, the school will provide each parent with a school-wide directory of all the children enrolled in our programs. We hope that this directory will help you arrange carpools or play dates.

**Here is the information we presently have on file for you. Please check it for accuracy and make any applicable changes on this form.**

Please sign the applicable section and return this form by Friday September 17, 2010.

**I give MCNS permission to publish my name, my child's name, address and phone number in a parent directory.**

\_\_\_\_\_  
Print Parent/guardian Name

\_\_\_\_\_  
Parent/guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Child(ren) name

**I DO NOT give MCNS permission to publish my name, my child's name, address and phone number in a parent directory.**

\_\_\_\_\_  
Print Parent/guardian Name

\_\_\_\_\_  
Parent/guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Child(ren) name