



ENROLLMENT AGREEMENT AND RELEASE

I, _____, being the parent or legal guardian of _____ ("my child"), hereby enroll my child in Play and Learn at Dulles Corner ("Center") beginning _____, _____, under the following terms and conditions.

1. Trial Period. The Center extends open enrollment to all children between six weeks and six years, without regard for sex, race, creed, country of origin or disability. All children are enrolled on a trial basis of one (1) month. If after a trial period, the Center is unable to meet the child's needs, parents will be given a minimum of two weeks notice to enable the parent ample time to identify care that is better suited to the child's needs.

2. General Release of Liability and Indemnification. I assume the risk of any and all injuries, losses and damages to my child, my personal property and the personal property of my child which may occur in connection with my child's enrollment in the Center and their participation in the Center's activities. I understand that the Center maintains insurance policies to cover injuries, losses, and damages to my child due to fire, theft, storm, the negligent operation of the Center and the negligent acts of the employees or agents of the Center and other causes. I hereby waive and agree to release any claims which I, my child, or my child's heirs may have against the Center for any and all injuries, losses and damages to my child, my personal property and the personal property of my child to the extent that such injuries, losses and damages are not covered under the Center's insurance policies, or to the extent that the monetary amount of such injuries, losses, cost and damages exceeds any amount payable under the Center's insurance policies. I agree to be responsible for and will indemnify, defend, and hold the Center harmless against any claims, suits, judgment, losses, or damages which may be brought or obtained against the Center, or be suffered by the Center, which result from acts of my child.

3. Parent's Handbook. I have received and read the Center's Parent Handbook and I agree to comply with the policies set forth in the Parent Handbook and to subsequent policy updates. I understand that my failure to comply with such policies may be grounds for the Center's immediate termination of my child's enrollment.

4. Outside Consultations. I understand that the Center staff will occasionally seek outside professional advice regarding the growth and development of children enrolled at the Center, and I grant permission for my child to be interviewed, observed, and tested by outside professionals (under the guidance of the Center). I understand that the results of

such interviews, observations or tests will be confidential records of the Center. I understand that I will be liable for any charges for such professional consultations.

5. Disclosure of Physical Conditions. I certify that I have fully and accurately disclosed all physical conditions of my child (including but not limited to allergies, handicaps and communicable diseases or conditions), that may affect my child's ability to participate in the activities of the Center or which may affect other children and individuals at the Center. I understand that failure to disclose such conditions is grounds for immediate termination of my child's enrollment in the Center.

I certify that I have read and understand all provisions of this Agreement, and I voluntarily accept the terms of enrollment set forth herein.

Signature of Parent or Guardian

Date

Enrollment of the above-named child is hereby accepted under the terms and conditions established above.

Signature of Center Administrator

Date