

*Mountain Valley
Child Development Center*

Special Needs Acknowledgement

To my knowledge, my child, _____, has no special medical, physical, nutritional, or behavioral, needs that I am aware of.

Parent's/Guardian's Signature

Date

My child, _____, has the following special needs.

Description of special needs: _____

Parent's/Guardian's Signature

Date

Photo Release

Mountain Valley Child Development Center **MAY** **MAY NOT** (circle one) photograph my son/daughter.

Parent's/Guardian's Signature

Date

Watch Me Grow

I acknowledge that Mountain Valley Child Development Center has entered an agreement with Watch Me Grow to provide streaming video images of their children while at the center, and that my child's room is included in this agreement.

Parent's/Guardian's Signature

Date