

Luray United Methodist Preschool

1 West Main Street, Luray, VA 22835

Phone 540-743-6540

Parent/Guardian Agreement

Child's Name _____

Parent/Guardian
Name _____

I have read and understand the attached infection control policies and I agree to abide by them for the protection of my child as well as the other children and staff members at Luray United Methodist Preschool.

Parent /Guardian
Signature _____ Date _____
