



## RECEIPT OF INFORMATION STATEMENT

I hereby certify that I have received and read a copy of the Jefferson Child Care and Education Center Parent's Manual which includes the information to parents statement, as published by the Division of Youth & Family Services and the Center policies follow:

- Policy on the Release of Children
- Policy on Dispensing Medication
- Policy on Parent Participation
- Philosophy on Child Discipline
- Policy on Management of Communicable Diseases
- Expulsion from program

Child's Name \_\_\_\_\_

Parent's Name \_\_\_\_\_

Date \_\_\_\_\_

My child \_\_\_\_\_ is in good health and can participate in the normal activities of the program.

Please list below any conditions or special needs that may require special accommodations for your child.

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Signature of Parent or Guardian