



After reading the policies provided, please initial on the appropriate lines and sign below.

• **Screening Process**

_____ *I acknowledge that I have received information on the screening process at The Fisher Early Learning Center and that my child will be screened within the first three months of their attendance.*

• **Tuition Policy**

_____ *I have read and understand the Fisher Early Learning Centers' Tuition Policy. By signing below, I hereby agree to pay my child's tuition in a timely manner.*

• **Walking Excursion Policy (select one)**

_____ *I give permission to allow my child to take walking excursions around DU*
 _____ *I do not give permission to allow my child to take walking excursions around DU.*

• **Sunscreen Policy (select one)**

_____ *I choose to use the Rocky Mountain Sunscreen provided by Fisher. I understand that a \$20 charge will be added to my child's bill.*
 _____ *I do not wish to use Rocky Mountain Sunscreen and will provide sunscreen for use on my child.*

• **Photograph and Videotape Policy (select one)**

_____ *I give permission to have my child photographed for instructional or general informational purposes.*
 _____ *I do not give permission to have my child photographed for instructional or general informational purposes.*

• **Student Participation Policy (select one)**

_____ *I give my consent for my child to interact with University of Denver students who are in my child's classroom working as a volunteer, doing observations, or fulfilling undergraduate or graduate practicum or field work requirements.*
 _____ *I do not give my consent for my child to interact with University of Denver students who are in my child's classroom working as a volunteer, doing observations, or fulfilling undergraduate or graduate practicum or field work requirements.*

• **Off Campus Field Trip/Transportation Policy (select one)**

_____ *I give permission to allow my child to participate in off campus field trips and accompanying transportation.*
 _____ *I do not give permission to allow my child to participate in off campus field trips and accompanying transportation.*
 _____ *I give permission to allow my child to participate in off campus field trips and accompanying transportation, with the following adaptations as needed:*

Child's Name/Classroom

Parent/Guardian's Name

Parent/Guardian's Signature

Date