Parental Agreement with Kids Kondo

1253 North Highland Ave • Atlanta, GA 30306 • 404.897.1936 • fax 404.897.1008 • kidskondo.com • info@kidskondo.com

M – F 7:30ar	n – 5:30pm	
Kids Kondo agrees to provide childcare for		on
Child	d's Name	
{Check all that apply} Monday Tuesday Wednesday T	hursday Friday	
from 7:30 am to 5:30 pm.		
1. My child will / will not participate in the meal plans prov	vided.	
2. Before any medication is dispensed to my child, I will submit a	written Medication Authorization For	m. Rx must be in
its original container with my child's name on it.		
3. I give Kids Kondo permission to apply one or more of the follow	ring topical ointments/preparations,	when applicable,
to my child in accordance with the directions on the label of the container: baby wipes; band-aids; Neosporin or similar		
ointment; Bactine or similar first aid spray; sunscreen; insect repe	llent; non-prescription ointment such	h as A&D,
Desitin, Vaseline; or baby powder.		
4. My child will not be allowed to enter or leave the facility witho	ut being escorted by a parent(s), auth	norized person(s)
or a Kids Kondo staff member.		
5. I acknowledge it is my responsibility to keep my child's records	current to reflect any significant char	nges as they
occur, i.e., address, telephone, emergency contacts, physician(s),	health status, feeding plans, immuniz	zation records.
6. Kids Kondo agrees to keep me informed of any incidents that m	ay include my child. This could be bu	it is not limited to
Illness, injury, adverse reactions to medication, exposure to comm	nunicable disease or another situation	n that could
create difficulty to the child(ren) or staff.		
7 I give Kids Kondo permission to use the likeness or image of my	child in print or online materials such	as those on the
Kids Kondo Web Site.		
8 Kids Kondo agrees to obtain written authorization from me befo	ore my child is allowed to participate	in routine
transportation, field trips, special activities away from Kids Kondo	and water related activities occurring	g in water that
is more than two (2) feet deep.		
9 Before withdrawing or canceling a reserved position for my child	d, I will provide Kids Kondo 4 week's ı	notice. This
applies to any child that is currently enrolled or any child who has	a reserved position with a start date	but has not yet
attended. If unable to provide 4 week's notice of withdrawal, the	n I agree to pay tuition equivalent of	up to 4 weeks
from the date notice was given.		
10 I have received a copy of the Kids Kondo Handbook and agree	o abide by their policies and procedu	ures.
Parent / Guardian Signature Date Pare	nt / Guardian Signature	Date