



## HOLLYWOOD CAMPUS

7600 North Davie Road Ext.  
Hollywood, FL 33024  
(954) 963-2600



Parent /Guardian \_\_\_\_\_

of \_\_\_\_\_

The Parent/Student has reviewed the handbook with my child and will comply with all the rules and regulations set forth in this guide.

Parent/guardian is aware that childcare personnel has access to the child's records.

Student's  
Signature: \_\_\_\_\_

Parental/guardian  
Signature: \_\_\_\_\_

Teacher: \_\_\_\_\_

Grade: \_\_\_\_\_ Date: \_\_\_\_\_

This is a required document, please remove, sign, and return this verification form to the office.

*Thank You*

