

School of Life Preschool
5501 S. LaSalle Ave
Chicago, Illinois 60621
773-324-2055

I/we, _____, parent (s) of _____,
Please print Please print

hereby certify that I/we have received a copy of the School of Life Preschool Parent Handbook, Childcare Program, and have read the Handbook, taking particular note of the sections pertaining to the Center's discipline policies found on page 6, late pick-up policies on page 2, Enrollment and discharge on page 3, religious instruction on page 1,2, and tuition policies on pages 3,4,9.

Signed _____ Date _____

Signed _____ Date _____