

NATIONAL URBAN COALITION FOR UNITY AND PEACE, INC.



A non-profit 501 (3) organization established 1986

Parental Agreement with NUCUP, Inc.

1. NUCUP, Inc. agrees to provide learning and enrichment programs for (child's name) _____ on (days of week) _____ from ____ a.m. to ____ p.m. from (month) _____ to (month) _____. My child will participate in the following meal plan (circle applicable meals and snacks): breakfast, morning snack, lunch, afternoon snack, evening meal, bedtime snack.
2. Before any medication is dispensed to my child, I will provide a written authorization, which includes information on dates, name of child, name of medication, prescription number, if any, dosage, date and time of day medication is to be given. Medicine will be in the original container with my child's full name marked on it.
3. My child will not be allowed to enter or leave the facility without being escorted by the parent(s) or person authorized by the parent(s), or facility personnel.
4. I acknowledge that it is my responsibility to keep my child's records current to reflect any significant changes as they occur, (i.e. telephone numbers, work location, emergency contacts, child's physician, child's health status, infant feeding plans, immunization records, etc.).
5. The facility agrees to keep me informed of any incidents, including illnesses, injuries, adverse reactions to medications, etc., which include my child.
6. NUCUP agrees to obtain written authorization from me before my child participates in routine transportation, field trips, special activities away from the facility, and water-related activities occurring I water that is more than two feet deep.
7. I have received a copy of this agreement and agree to abide by the policies and procedures for NUCUP.

Parent/Guardian Signature

Date

Facility Administrator/Person in Charge Signature

Date