## ACKNOWLEDGMENTS/RELEASES/PERMISSIONS 2025-2026

After reading over each statement, place your initials in the provided box by each

Acknowledgement/Release/Permission and sign at the bottom. [2 pages] I have received the link to the copy of the St. Bernadette Early Childhood Connections Parent Handbook which defines the school operational policies, discipline and guidance techniques, the school's Emergency procedures, and information/procedures concerning the Texas Department of Family and Protective Services. I will abide by all the policies and procedures as stated in the St. Bernadette Early Childhood **Connections Parent Handbook.** I understand I must submit my child's complete and up to date immunization record with my child's Student Health Record including Signed Doctor's Statement by the first day of school. Pre-K 4 NOTE – Vision and Hearing Screenings are required. IF my child has a diagnosed food allergy, I will provide St. Bernadette Early Childhood Connections with a "Food Allergy Emergency Care Plan" completed, signed and dated by myself and my child's health care professional, along with prescribed medication (Epi-Pen, etc.). I will notify St. Bernadette Early Childhood Connections of any changes to: my child's special needs, medical information, parent address or phone information, emergency contacts, or authorized persons who may pick up my child. I will share/notify St. Bernadette Early Childhood Connections of any test results or services my child receives from Early Childhood Intervention, Clear Creek ISD (or other school district), or any private diagnostic practice. I agree to all FINANCIAL obligations as stated in the Parent Handbook, as well as in the Financial Acknowledgement Commitment form. Non-payment may result in dismissal of my child. I have provided the names, addresses, phone numbers & emails of at least 2 other adults (other than parents) who may be contacted in an emergency. I will provide my child's lunch/snack. St. Bernadette Early Childhood Connections is not responsible for the nutritional value of lunch or snack or for meeting my child's daily food needs. Any snack I send for the class must be approved by the teacher (to meet all special diet needs.) I understand the importance of my child wearing safe closed-toe shoes (sneakers). My child will wear appropriate shoes to participate in Motor Skill/Gym Activities and on the playground. Pre-K 3s and 4s only: I understand that my child is to be potty trained and is able to use the bathroom independently. For repeated toileting accidents, my child will be dismissed until properly trained AND/OR I will be called to clean my child. I authorize St. Bernadette Early Childhood Connections' teachers and staff to seek emergency medical attention for my child.

## St. Bernadette Early Childhood Connections Picture Privacy measures:

and their children's friends at school functions. As pa	zes that many parents will take pictures of their children art of the St. Bernadette Community, we ask that you DO on Facebook or any internet site. Please be respectful of
I have read and I understand the request regard children on Facebook or any social networking site. I each child's privacy.	ing NOT texting or posting pictures of other people's agree to comply with this policy and be respectful of
classroom use. I understand that promotional picture class or other activities. I give permission for the photographic production of the photographic produ	s, calendars, bulletin boards, Power Point presentations,
St. Bernadette Early Childhood Connection's safety/s Parking is only permitted in marked spaces. No Park	
I understand and will follow ALL School Drop C Red Fire Lanes.	Off and Pick Up procedures. I will not park in marked
☐ I understand that my child must be dropped off	at ECC between 8:55 – 9:05 am.
☐ I understand that I will pick my child up from E	CC between 2:00 – 2:10 pm.
I have read and understand the use of the St. Be	rnadette ECC ID cards.
I understand all adults allowed to pick up/drop of	off my child are listed in the ProCare portal.
I understand I am encouraged to take an online class. I must be SAFE HAVEN trained to volunteer a	
Parent Signature	Date
Print Child's Name	