

MONTESSORI OF CALABASAS

Acknowledgement

I, as the parent, guardian or designated representative of

\_\_\_\_\_

Name of Child

have receive and read the following documents at the time of my child's admission to Montessori of Calabasas Inc.

**"Parent's Rights"** (LIC 995)

**"Personal Rights"** Community Care Facilities and Child Care Facilities (LIC 613)

I understand that the licensing agency has the right to interview children or staff

to inspect and audit the facility or children's records without prior consent. The

licensing agency has the right to observe the physical condition of any child(ren),

including conditions which could indicate abuse, neglect or inappropriate

placement, and to have a licensed medical professional physically examine the

child(ren).

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Parent/Guardian Signature

Date

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Parent/Guardian Signature

Date