



Special Needs and Release Form

Child's Name: _____

Special Needs Acknowledgment:

- To the best of my knowledge, my child **DOES NOT** have special medical, physical, nutritional or behavioral needs that require attention by the staff of the North Star Academy.
- My child **DOES HAVE** the following special needs that the staff of the North Star Academy needs to be aware of for the benefit on both my child and the staff. Listed below are those needs:
 - Please list all special needs of your child which require attention such as allergies, existing illness, injuries both current and previous, medical conditions and prescriptions, religious observations and or anything else that the staff/teachers should be aware of.
 - Also note that all information provided will strictly be kept confidential and private and shall only be used by the staff of the North Star Academy LLC.

Photo Release:

North Star Academy will occasionally take photos of the children to use in projects, and post for parents to see. These photos are property of North Star Academy and may not be able to be reproduced.

North Star Academy uses printed materials for advertisement purposes and will request written consent if we wish to use photos including your child/children in any advertising materials. Should we receive approval, you relinquish all rights, title and interest in the finished photographs and negatives.

Parent Handbook Acknowledgment:

- I **HAVE** received a copy of the North Star Academy LLC parent handbook.
- I **HAVE NOT** received a copy of the North Star Academy LLC parent handbook.

Water Play Permission

My child **HAS** **DOES NOT HAVE** permission to participate in water play activities which may include splash pools, sprinklers, and/or inflatable water slides while at the North Star Academy LLC.

Signature of Parent or Legal Guardian: _____

Date: _____