



FERN HILL SCHOOL

PARENTAL AGREEMENT

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student's name

In registering my child at Fern Hill School, I agree to the following conditions:

1. To pay the school fees as set out in the fee schedule.
2. That no rebate or reduction of fees will be given as a result of my child being absent from the school.
3. To keep my child away from school if unwell.
4. In the case of an accident, if neither I, my spouse, nor my emergency contact person can be reached, I authorize the school to take appropriate steps, such as accompanying my child to a doctor or hospital.
5. Insurance has been obtained for any act of negligence in which a staff member may be liable. I also understand that the school and its staff will take precautions to see that no such act occurs.
6. To be involved in the Fern Hill School Community. For example, parents of pre-school students provide a snack for the class on a rotational basis, approximately once per month.
7. My child will be expected to follow the behavioural management guidelines of Fern Hill School. I have read the guidelines and I support and understand the procedures the school will take if my child does not follow the guidelines.
8. Children are required to wear a uniform in the kindergarten and grade school classes. I will ensure that my child wears the appropriate uniform.
9. Students are sometimes brought off school property during routine fire drill procedures. I agree to allow my child to follow monthly fire drill procedures.
10. I will inform Fern Hill School of any testing results, therapy limitations, weaknesses or special programs that my child has been involved in or becomes involved in that might affect his/her academic performance or behaviour.
11. The Principal has the right to suspend or dismiss any student. Reasons for suspension or dismissal include, but are not limited to, scholarship or behaviour which is detrimental to the standards of the school. In the event of the student's suspension, dismissal, withdrawal, or absence from the school for any reason whatsoever, the parents or guardians shall be liable for payment of the entire annual fees. No portion of fees paid or outstanding will be refunded or cancelled. My signature below indicates my full acceptance of these obligations.

parent 1's signature

date (dd.mm.yy)

parent 2's signature

date (dd.mm.yy)

PLEASE RETURN THIS FORM AND THE REQUIRED INFORMATION SHEET AND POST-DATED CHEQUES TO THE SCHOOL OFFICE
Kindly make cheques payable to *Fern Hill School*

OFFICE USE ONLY:

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| <input type="checkbox"/> information sheet completed | <input type="checkbox"/> cheques received |
| <input type="checkbox"/> agreements completed | <input type="checkbox"/> confirmation sent |