



DEARCROFT MONTESSORI SCHOOL PROTECTING YOUR PRIVACY

At Dearcroft, we are committed to protecting your personal information. This is our privacy commitment to you as a parent, student, employee, alumnus or friend of Dearcroft.

We collect your personal information only to provide services for which you have registered, to understand your needs and to assist us in creating new services that will serve you better.

We do not disclose your personal information to any other organization or individual outside of the School, unless it is necessary to provide you with services from Dearcroft, Dearcroft communications, or when required by law. We provide every registered family with a class address and telephone list. However, if you wish to opt out of such a listing, please notify Administration in writing.

Your personal information is processed and stored in secure and confidential databases with strict access controls. If you have any questions or concerns about how your personal information is gathered, used or retained, or wish to opt out of receiving specific Dearcroft communications, please let us know by informing our Administration Office in writing.



**DEARCROFT MONTESSORI SCHOOL
INFORMED CONSENT**

Child's Name _____

In consideration of my child's attendance and participation in activities at Dearcroft Montessori School, I the undersigned, hereby acknowledge that certain risks are inherent in participation at school and in sports and recreational activities. I agree that Dearcroft Montessori School, and its directors, officers, employees, or agents shall not be liable for any injury to my child or loss or damage to my child's personal property arising from, or in any way resulting from, my child's participation at school. I understand that I am responsible for informing Dearcroft Montessori School and its directors, officers, employees and agents of any medical condition(s) my child has at the time of registration or acquires during their enrollment at the school. In the event of any medical emergency, I hereby give permission selected by Dearcroft and its directors, officers, employees and agents to secure proper medical treatment for the person(s) named.

Signature of Parent _____ Date _____

Photo Release/Web Site Permission

I, hereby, give permission to Dearcroft Montessori School to use any photographs of my Child on the school's web site, as well as for display in the school and/or school fairs and for school brochures and any other promotional material produced by Dearcroft Montessori School. At no time will any child's name be published.

Signature of Parent _____ Date _____

Personal Information Release

I, hereby, give permission to Dearcroft Montessori School to be included in the class address lists. I understand that this list will contain my child's name, address, telephone number and parent's names and it will be given to each registered family at the school. I also agree to be included on the school email list to receive information by email. If I wish to opt out of these lists, I will provide Administration with written notice.

Signature of Parent _____ Date _____