

FORM #1
Please complete
and return
ASAP

RAINBOW MONTESSORI SCHOOL
4 Madison Avenue | Madison, NJ 07940 | 973-377-0135
Academia and The Arts: Perfect Together



SIGNATURE INFORMATION

By my signature I attest to the fact that all the information I have given to Rainbow Montessori School is correct and that I have received the following items listed below:

State and School Forms

Need to be completed, signed and returned to the school by Friday, May 2, 2014.

1. Signature Information Form
2. Information to Parents Statement
3. Expulsion Policy
4. Discipline Policy
5. Information About My Child Form (new students only)
6. Medical Release Authorization
7. Food Allergy Questionnaire
8. Directions for Reaching Parents in an Emergency
9. Indefinite Alternate Pick-Up Form
10. Nut Free School Notice
11. Publicity Permission Form
12. Parent E-Mail Address Form
13. School Closing/Delayed Opening Notification Form
14. Influenza Immunization Requirement
15. Standard School/Child Care Center Immunization Record
16. Universal Child Record Health Form
17. Epi-Pen Notification

Policy Forms and School Calendar

Please read and retain for reference.

1. School Calendar (to follow)
2. Alternate Pick Up Authorization Information
3. Policy on the Management of Communicable Diseases
4. School Illness Policy
5. Immunization Requirements
6. Information to Parents Instructions
7. RMS School Food Policy
8. Policy on the Release of Children

Parent's Signature

Date

My vehicle license plates are: Vehicle #1 _____ Vehicle #2 _____