

Lansdowne LEAP Program

2020 - 2021 School Year

Parent Acknowledgement Form

Upon completion of enrollment of my child(ren) into the Lansdowne Elementary After School Program, known as LEAP,

I, (print) _____, parent/guardian of
child(ren), _____,
understand and acknowledge the program policies, procedures, fees,
and behavior expectations involved with the program.

Parent/Guardian Signature: _____

Date: _____

LEAP Director Signature: _____

Date: _____