Student Name:	Teacher :
Dear Parent/Guardian,	
read, understand and reView with ye	(teach) and for your child to do their job (learn), it is Very important that your child the information contained in our handbook. Please sign this form and questions concerning the handbook are to be directed to Dawn Koski, early lkoski@isd712.org.
I, contained in this preschool hand!	haVe read, understood, and will abide by the information book.
I,	, acknowledge I haVe read and will abide by the attendance and de by them throughout the year.
I,	, acknowledge that I haVe <i>adequate insurance protection</i> for the m.
Signature	Date

MIB Early Childhood Parent Handbook Signature Page (please return with registration paperwork)

Please return to:

Print name

Dawn Koski, Early Childhood Coordinator
Mt. Iron-Buhl Public Schools
8659 Unity Drive
Mt. Iron, MN 55768
dkoski@isd712.org | 218-735-8271 x 1020