



Handbook Acknowledgement Form 2016-2017

I, _____ (Parent or Guardian), hereby confirm that I have personally read the *Country Day School of Arlington 2016-2017 Parent/Student Summer Handbook*. With this signature, I acknowledge my understanding and acceptance of the policies set forth in this publication.

Student Name(s):

____/____/____

Parent's Signature

Date

**REQUIRED: PLEASE RETURN TO THE FRONT DESK
OR BUSINESS OFFICE BY MONDAY, SEPTEMBER 12TH**

For internal use only:

- Procare
- Check-list