



17 Greenwich Church Road  
Stewartsville, NJ 08886  
Phone 908-479-6886 • Fax 908-479-4269  
[www.greenwichnursery.com](http://www.greenwichnursery.com)

Name of Child: \_\_\_\_\_  
Name of Parent: \_\_\_\_\_

**Discipline Policy Disclosure**

I have read and received the policy statement on the disciplining of children by staff members as specified in N.J.A.C.10:122-6.6(e)

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Information to Parents Statement Disclosure**

I have read and received a copy of the Information to Parents statement prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Release Policy Disclosure**

I have read and received a copy of the Release Policy prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Expulsion Policy Disclosure - 10:122.6.8**

I have read and received a copy of the Expulsion Policy prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Toilet Training Policy**

I have read and received a copy of GNS Toilet Training Policy (if applicable).

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Tuition Policy**

I have read and received a copy of the GNS Tuition Policy.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_