

Annual Agreement Packet



College Park Nursery School

A parent-run cooperative

4512 College Avenue, College Park, MD 20740
301-864-5355 • <https://www.collegeparknursery.org/>

ANNUAL MEMBERSHIP AGREEMENT AND PERMISSIONS

Student: _____

Enrolled Class: _____

Welcome to the _____ school year! All enrolled families are members of College Park Nursery School (CPNS) and are expected to follow our school's policies and procedures, which were reviewed during the Annual Membership Orientation this past August. You can watch the full recording and refer to the Orientation handouts here: <https://www.collegeparknursery.org/orientation>

This form includes:

- Acknowledgment of key policies and procedures covered at the Orientation
- Confirmation of receipt of state-required materials
- A general walking field trip permission form for this school year

Please review the linked materials carefully and initial or sign where indicated.

1. Cooperative Membership Responsibilities Agreement

I understand that College Park Nursery School is a cooperative preschool, and that my family's participation is essential to its daily functioning and success. I agree to adhere to these [Cooperative Membership Responsibilities](#) and agree to fulfill them:

- Complete my family's **co-oping commitment** in the classroom, or purchase a full buyout.
- **Provide snacks** for our class on a rotating weekly schedule.
- Assume a **family job** and actively participate in that job throughout the year.
- Attend a **Big Clean event**, the **Annual Orientation** and at least 3 of the 4 **Membership Meetings**.
- Participate in and contribute to **schoolwide community and fundraising events**, to the best of my/our ability.

Initials: _____

2. Acknowledgement of CPNS Policy Manual

I have read and understand the terms of participation at College Park Nursery School as outlined in the [CPNS Family Handbook and Policy Manual](#), and I agree to uphold them as long as my child is enrolled at CPNS.

Initials: _____

3. Acknowledgement of CPNS General Health Policy

I understand that College Park Nursery School implements necessary precautions based upon current guidance from the Maryland Department of Health and Office of Child Care to minimize the risk and spread of communicable disease to children, families, and staff, but it is impossible to eliminate all risks.

By initialing below, I agree to comply with College Park Nursery School's [General Health Policy](#), as well as with any future changes made, per licensing and the state requirements. I also knowingly and freely acknowledge the potential risk of exposure to a communicable disease and assume all responsibility for my child's participation.

Initials: _____

4. Confirmation of Receipt of State-Required Materials

I confirm that I have received and reviewed the following required State materials/information:

- [Parent's Guide to Regulated/Licensed Child Care](#)
- [Maryland Infants and Toddlers Program](#) (Birth to 35 months)
- [Maryland Child Find Program](#) (35 Months to 5 Years/Pre-K)

Initials: _____

5. Walking Field Trip Permission

I understand that students may occasionally take walks within a 1–2 block radius of the College Park Nursery School grounds as part of their class's lesson (for example, to observe nature, mail letters, or participate in a class "parade") under the supervision of CPNS staff and assigned co-ops.

I understand that these walks may sometimes be unplanned. By initialing below, I grant permission to College Park Nursery School staff members and the assigned aide(s) or co-ops to take my child on walking trips with their classroom during the _____ school year.

Initials: _____

By signing below, I confirm that I have read and understood the policies, materials, and permission included above.

Parent/Legal Guardian Signature:

Name: _____

Date: _____