

KiddieKlub

Preschool/PreK Ratio Authorization

I, _____ give permission for my child, _____ to follow the
(Parent/Guardian Name) (Child Full Name)
State of Michigan 3-year-old ratio of 1:10 once my child has reached 33 months of age, and to follow the State of Michigan 4-year-old ratio of 1:12 when my child has reached 45 months of age.

Parent Signature: _____

Date: _____