



ENROLLMENT AGREEMENT

I hereby affirm that all the information I have provided in the attached Texas Dept. of Protective and Regulatory Services Enrollment Information Form # 2935ep 2-2000 is true and correct.

I will update this information if it changes during the course of this year.

Signature - Parent or Legal Guardian

Date

Printed Name of Parent or Legal Guardian

Good Shepherd Learning Center

9191 Cochran's Crossing Drive

The Woodlands, TX 77381

936-273-2080