



Rae's Playze Adult Day Center
Policy and Procedures
Acknowledgement Form

I acknowledge that I have received a copy of the Rae's Playze Adult Day Center's Policy and Procedures Manual. I understand that it is my responsibility to familiarize myself with the policies therein. This manual may be amended at any time.

Print Member/Legal Responsible Party Name

Date

Signature Member/Legal Responsible Party Name

Date

Signature Executive Director Name

Date