

2019 - 2020 Lavender Farm Preschool Parent Authorizations



Child's name: _____

I hereby grant permission for my child to use all of the play equipment and to participate in all of the activities of this child care program.

Parent/Guardian signature

Date

Parent/Guardian signature

Date

I hereby grant permission for my child to be included in photos connected with the program.

Parent/Guardian signature

Date

Parent/Guardian signature

Date

I hereby grant permission for the provider to take whatever steps may be necessary to obtain emergency medical care for my child if warranted. These steps may included, but are not limited to, the following:

1. Attempt to contact a parent or guardian.
2. Attempt to contact the child's physician.

3. Attempt to contact the parent through any of the persons listed by the parent on the emergency medical form.

4. In the event that 1–3 are unsuccessful:

- A) Call another physician
- B) Call the paramedics
- C) Have the child taken to the hospital

I understand that any expenses incurred under #4 above will be borne the child's family or legal guardian.

Parent/Guardian signature

Date

Parent/Guardian signature

Date