Parental Permission Form

Please initial all lines and sign at the bottom, Thank You

	I hereby grant permission for my child to use all of the play equipment and participate in all of the activities of the Center.
	I hereby grant permission for the Director or person in charge to take whatever steps
	necessary to obtain emergency medical care if warranted.
The	ese steps may include, but are not limited to the following:
1.	Attempt to contact a parent or guardian
2.	Attempt to contact you through any person listed on the emergency contact information
	that you provided us
3.	Attempt to contact the child's physician
4.	If we cannot contact you or your child's physician, we will do any or all of the following:
a.	Call an ambulance
b.	Have the child taken to the emergency hospital in the care of a staff member
	(Any expense incurred will be the responsibility of the child's family)
	The Center will not be responsible for anything that may happen
as a result of false information given at time of enrollment.	
	I hereby grant permission for the Center to take pictures of my child with the
	understanding that the sole purpose of the pictures will be for:
1.	Classroom Projects
2.	Recording of Day to Day Activities
3.	Recording of Special Events
4.	Posting Pictures and Videos on Procare
Pictures will not be shared or reposted onto the internet by anyone!	
	_ I hereby grant permission for the Center to use these products on my child for the
	sole purpose of providing health and safety:
1.	Sunscreen – for outdoor play if UV is greater than 4
2.	Hand Lotion – for dry chapped hands
3.	Chapstick – for dry chapped lips (provided from home)
	Sunscreen and Hand Lotion will be Hypoallergenic and Fragrance Free
	Sunscreen will be Hypoallergenic and Oxybenzone and Paraben Free
Child's Name Date	
Parent's Signature	