

Parental Agreement with Child Care Facility

The _____ agrees to provide day care for _____
Name of Facility Name of Child

on: (circle all that apply) **Monday Tuesday Wednesday Thursday Friday Saturday Sunday**

from _____ to _____
(center's operating hours)

My child will participate in the following meal plan (circle applicable meals and snacks):

Breakfast Morning Snack Lunch Afternoon Snack Evening Meal Evening Snack

2. Before any medication is dispensed to my child, I will provide a written authorization, which includes: date, name of child, name of medication, prescription number, if any; dosage; date and time of day medication is to be given. Medicine will be in the original container with my child's name marked on it.

3. My child will not be allowed to enter or leave the facility without being escorted by the parent(s), person authorized by parent(s), or facility personnel.

4. I acknowledge it is my responsibility to keep my child's records current to reflect any significant changes as they occur, e.g. telephone numbers, work location, emergency contacts, child's physician, child's health status, infant feeding plans and immunization records, etc.

5. The facility agrees to keep me informed of any incidents, including illnesses, injuries, adverse reactions to medications, exposure to communicable disease, which include my child.

6. The _____ agrees to obtain written authorization from me before my child
Name of Facility
participates in routine transportation, field trips, special activities away from the facility, and water-related activities occurring in water that is more than two (2) feet deep.

7. I have received a copy and agree to abide by the policies and procedures for _____
Name of facility

Signature (Parent/Guardian) _____ Date _____

Signature (Parent/Guardian) _____ Date _____