



# Consent & Release

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Name of Facility: \_\_\_\_\_ Address of Facility: \_\_\_\_\_

Name of Child: \_\_\_\_\_

**The following persons are allowed to pick up my child from child care in the event that I am unable to:**

<u>Name</u>	<u>Phone</u>	<u>Relationship</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Anyone **NOT** permitted to pick up my child (with copy of court order, if applicable):

_____	_____	_____
_____	_____	_____

**Consent is given for the items initialed below:**

\_\_\_\_\_ Walking Trips  
To the following: \_\_\_\_\_

\_\_\_\_\_ Motor Vehicle Trips  
Type of vehicle: \_\_\_\_\_ To the following: \_\_\_\_\_  
Child restraint system to be used: \_\_\_\_\_  
Special needs of child during transport: \_\_\_\_\_

\_\_\_\_\_ Daily Transportation  
Type of vehicle: \_\_\_\_\_ To/from the following: \_\_\_\_\_  
Child restraint system to be used: \_\_\_\_\_  
Special needs of child during transport: \_\_\_\_\_

\_\_\_\_\_ Swimming and/or Wading  
Location: \_\_\_\_\_

\_\_\_\_\_ Other Activities (e.g. homework supervision, trips to neighborhood playgrounds, special trips)  
Description: \_\_\_\_\_

\_\_\_\_\_ Photo Release  
My child may be photographed while in child care. Photos may be used in newspapers or other media for the purpose of publicity or shared with other families whose children attend the child care program.

\_\_\_\_\_ Decline Photo Release  
Do not photograph my child while in the child care program.

\_\_\_\_\_  
Signature of Parent Date