

A Place To Grow Daycare

Parent/ Guardian Authorization

Please list any restrictions to permission of the following:

- € My child may be taken on field trips or excursions by private motor vehicle, as well as on neighborhood walking excursions under required supervision.

- € My child may participate in swimming or other water activities under required supervision

- € My child may be given non-prescribed medication as indicated on the container. This may include sunscreen, children's pain reliever, antibacterial first aid cream, and diaper ointment. Syrup of ipecac may be administered if deemed necessary by the poison control operator. The child's parent or guardian will be contacted prior to administering non-prescription pain relievers. Prescription medications must be current and a permission slip is required for each medication.

- € My child may be photographed for publicity or news purposes

- € On-site
- € Off-site

In an emergency, the child care facility has my permission to call an ambulance, or take my child to any available physician or hospital at my expense to obtain medical treatment.

Parent/Guardian Signature _____

Date _____