

PERMISSION FORM

Child's Full Name: _____

1. I hereby grant permission for my child to use all of the play equipment and participate in all activities of the Preschool.
2. I hereby grant permission for my child to leave the Preschool premises under the supervision of a staff member for neighborhood walks, or field trips. Notification of field trips will be given in advance and an authorization form signed by the parent will be needed.
3. I hereby grant permission for the head teacher and/or director to take whatever steps may be necessary to obtain emergency medical care. These steps may include, but are not limited to, the following:
 - a. Attempt to contact a parent or guardian.
 - b. Attempt to contact the child's physician.
 - c. Attempt to contact the parent through persons listed on the Emergency card.
 - d. If the emergency is urgent, 911 will automatically be called prior to performing the above steps. We will try to honor the hospital designated on the Emergency card.
 - e. Any expenses incurred as a result of calling 911 will be the responsibility of the child's family.
4. I hereby grant permission for the staff to administer Ipecac Syrup, if advised by The Minnesota Poison Control Center.
5. I hereby grant permission for my child to be included in the pictures connected with publicizing the Preschool.

Signed:

Signed: _____	_____
Parent/Guardian	Date
_____	_____
Parent/Guardian	Date