

**ST. JOHN'S CHILD CARE CENTER
PARENTAL PERMISSION FORM**

Please read over the following items and fill in the necessary information. A copy of this form may be completed annually and will remain in your child's file.

I give permission to St. John's Child Care Center to have my child _____ participate in publicity or research activities at the center. I understand I will be notified of the date and time of such activities.

I give permission to St. John's Child Care Center to have my child _____ photographed and displayed on the St. John's website.

I give permission to St. John's Child Care Center to take my child _____ on supervised neighborhood walking trips and to neighborhood parks for supervised playtime.

I give permission to St. John's Child Care Center to take my child _____ on supervised field trips that require public or private transportation. I understand that I will be notified of date and times of such trips.

I give permission to St. John's Child Care Center to take whatever emergency (e.g. first aid, disaster evacuation) measures are judged necessary for the care and protection of my child while under the supervision of the center.

In case of medical emergency, I understand that my child will be transported to the appropriate medical facility, by the local emergency unit for treatment, if the local emergency resource (police, rescue squad) deems it necessary. The child will be transported at the expense of child's parent or legal guardian.

It is understood that in some medical situations the staff will need to contact the local emergency resource before the parent, child's physician and/or other adult acting on the parent's behalf.

I have received a copy of the center's policies and understand them.

Parent Signature _____ Date _____