

## **Permission Forms for Registration**

Permission is granted for the following children: \_\_\_\_\_

### **Arrival and Departure**

Parents are responsible for bringing their child into the building each morning. When doing so they must clock their child in and take them to their appropriate classroom. Parents must come into the building in the evening when picking their child up & clock their child out.

Children may not be dropped off at the center from 10:00 – 2:30 due to the classrooms' lunch and napping schedules, unless previously arranged. Parents will be responsible for putting their child's belongings in their classroom and for taking them home each day. Children will have individual areas with their work and notes from the teacher/office. Please be sure to check your child's cubby/file on a daily basis.

Parents must call the center to inform us if someone is picking up their child that is not designated on the child's Emergency Contact. Specific required information must be given during the phone call in order for this to take place.

I understand, and I agree.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### **Right to Refuse the Release of Children**

Center management and staff may refuse to release children if we have reasonable cause to suspect that any person picking up a child is under the influence of drugs or alcohol, or is physically or emotionally impaired in any way that may endanger the child. To protect your child, we may request that another adult listed as an Emergency and Release Contact pick-up the child or we may call the police to prevent potential harm to your child. Reoccurring situations may result in the release of your child from the program.

If there is a Court Order keeping one parent or guardian away from the child, Hansel & Gretel Early Learning Center must have a copy of the Court Order on file otherwise we cannot prevent the non- custodial parent from picking up the child.

I understand, and I agree.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### **Emergency Permission**

I give permission to Hansel & Gretel Early Learning 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. I hereby give permission for Hansel & Gretel Early Learning Center to call a physician or to secure necessary medical care, and to otherwise act on my behalf to protect my child when I cannot be reached and/or when delay would be dangerous in case of illness or accident.

I grant permission for the Director or acting Director to take whatever steps may be necessary to obtain emergency medical care if warranted. These steps may include but are not limited to the following:

1. Attempt to contact a parent/guardian.
2. Attempt to contact the child's physician.
3. Attempt to contact any of the persons listed on the child's Emergency Contact Form.
4. If we cannot contact you or the child's physician, we will do any or all of the following:
  - call another physician or paramedics
  - call an ambulance
  - have the child taken to an emergency hospital in the company of a staff member.
5. Any expenses incurred under #4 will be borne by the child's family.
6. The school will not be responsible for anything that may happen because of false information given at the time of enrollment.
7. The school will not assume responsibility for a child who has not been signed in when he/she arrives for the day.

I understand, and I agree.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### **Dietary Restrictions**

The center's policy concerning meals and snacks tries to accommodate the dietary needs of all of our children; however, we are not able to substitute foods for children's dislikes or intolerances. This policy refers only to restrictions due to allergy or religious preferences. Please indicate any special needs your child may have concerning this. Please note: Allergies require a doctor's written diagnosis.

\_\_\_\_\_ My child has the following need: \_\_\_\_\_

\_\_\_\_\_ My child cannot have milk. I will provide: \_\_\_\_\_  
(This must come in its original container.)

\_\_\_\_\_ My child has no dietary restrictions.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Ages & Stages Questionnaire Screening Participation (ages 6 weeks – 5 yrs.)**

Please note: ASQ-3™ is designed for screening, not diagnosis. It is a quick check for children from birth through age five. If your child is age six or older, please discuss his or her development with your child's health care provider, your local school district, or your child's teacher.

**Please complete the following as it applies to your child:**

\_\_\_\_\_ I would like for my child to participate in the **Ages & Stages Questionnaire** screening and monitoring program.

\_\_\_\_\_ My child has an IEP (Individualized Education Plan) or IFSP and I am providing a copy of it for school records.

\_\_\_\_\_ My child has an IEP (Individualized Education Plan) or IFSP and I am providing a copy of it for school records. I give Hansel & Gretel permission to contact the agency that originated the IEP or IFSP. I request that a staff member be present at the next IEP or IFSP meeting.

\_\_\_\_\_ My child receives services in the following areas:

\_\_\_\_\_ My child does not have an IEP or IFSP; therefore, this section does not apply to my child.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Results of the Ages & Stages Questionnaire will be shared with you after they have been compiled. If your child indicates a possible delay, you are encouraged to contact their Child Health Professional and/or our office. We can direct you to other possible resources at that time.

**Photograph/Video Permission**

Photographs and/or video footage may be used in center publications, newspapers, the center website, advertisements, the center Facebook page, and on bulletin boards. The photos will only be used to portray children in a positive way, and to illustrate their activities here at Hansel & Gretel. I also, understand that my child may be featured in media coverage by educational entities and/or for school use.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Permission to Use Sunscreen and/or Hand Sanitizer**

My child, \_\_\_\_\_, may have sunscreen applied to exposed skin areas before going outside on warm sunny days. I will provide a sunscreen with a sun protection factor (SPF) of 15 or more (without PABA is recommended as PABA gives some children blotchy rashes.)

I will mark my child's name on his/her sunscreen PLASTIC container with a permanent marker.

My child may/may not use hand sanitizer to clean his hands when no visible dirt is present and water is not available.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Participation in Water Activities**

Hansel & Gretel Early Learning Center has many activities involving water throughout the year. These include, but are not limited to:

- Water Sensory Table
- Water Bottles
- Swimming Pool
- Outdoor Water Play (ex: Sprinklers, etc.)
- Bathing a soiled child

Upon signing this form you agree to permit your child to participate in water activities.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Parent/Teacher Interaction**

I am interested in having a "Getting to Know You" meeting with my child's Teacher within the first few weeks of school. I am most available between the hours of \_\_\_\_\_ and \_\_\_\_\_. (Between 8:00 and 5:00 please). We will call to arrange a time for this meeting.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_