**PARENT SIGNATURES**

I agree to apply sunscreen on my child each morning prior to arriving at Curiosity Child Care. I give permission for a staff member to apply Sunscreen (provided by Curiosity) in the afternoon.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**For diapered children**: I agree to supply diapers and powder/ cream. Wipes from the daycare will be used. Please specify any special diapering instructions \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I allow my child to join his/her class on occasional walks in the neighborhood.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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In the event that my School-Age child is absent, or picked up early from school, and do NOT require a scheduled pick up after school, I agree to call the daycare and report my child’s absence.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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I am aware that it is not required of me to provide a health card number for my child.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I give permission for my child to have their photo taken.

Please circle all that are allowed: CLASSROOM WEBSITE FACEBOOK SITE

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand that I will be charged, and agree to pay my full rate for daycare every week, regardless of vacation or illness. Once my child is enrolled in the School-Age program, I will no longer be required to pay for summer holidays (providing I give written notice before May 15 of each year).

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_