



PERMISSION FORM

1750 20th Street, Vero Beach, FL 32960 / 772-562-7907 / License # C15IR0056

While your child is enrolled in **The Early Education Center**, you and your child will be expected to agree to the policies and procedures in **The Early Education Center** Parent Handbook. These policies may be changed at the discretion of **The Early Education Center** Board of Directors at any time. You will be notified of any changes thirty days prior to the implementation of such changes. Your enrollment in **The Early Education Center** represents your agreement to abide by these policies and procedures.

The Early Education Center will always seek to contact you first (i.e., the parent or legal guardian) in the event of illness. In case of an emergency we will contact 9-1-1. If we are on a field trip, we will contact the nearest medical facility. In the event that your child becomes ill or injured at any time while he/she is enrolled at **The Early Education Center**, it will be your responsibility to provide alternative care. We are only able to provide care to children in good health.

The Early Education Center considers field trips and nature walks an important part of the educational program of which your child will be a part. From time to time your child may also go on walks with the classroom teacher and class in the nearby neighborhood. We will provide the same adequate responsible supervision for these excursions as is provided to children in attendance at **The Early Education Center**.

Photographs of the children participating in our program may be taken from time to time and may appear in the classroom, an activities DVD or yearbook of the Center distributed to the parents at the end of the year, brochures and other publicity media. These are for your child's enjoyment and the Center's publicity and no compensation will be granted.

Your child's records are open only to the child's teacher, the Directors, authorized employees of the licensing agency, and you as a parent or legal guardian.

I agree to the above policies for my child _____
Name of Child

Name of Mother

Signature of Mother

Date

Name of Father

Signature of Father

Date