

**STATEMENT OF AUTHORIZATION**

I/We, \_\_\_\_\_, give my permission to Giant Step personnel to call a doctor for medical or surgical care for my child, \_\_\_\_\_, should an emergency arise. It is understood that a conscientious effort will be made to locate me or my spouse before any action will be taken. If it is not possible to reach us, the expense will be accepted by us.

Parent/Legal Guardian Signature

Date

I/We, \_\_\_\_\_, give my permission for my child, \_\_\_\_\_, to go on field trips away from the center premises, whether on foot or by vehicle. I understand the time, date, and location will be posted on the center's door at least the morning of and during the field trip so I can locate my child should an emergency arise.

Parent/Legal Guardian Signature

Date

I/We, \_\_\_\_\_, give my permission to Giant Step personnel to let my child watch G rated movies.

Parent/Legal Guardian Signature

Date

I/We, \_\_\_\_\_, give my permission to Giant Step personnel to put on, as needed, sun screen (spray-on) and bug spray. (We ask that parents please provide these items. Giant Step may share with others.)

Parent/Legal Guardian Signature

Date

I/We, \_\_\_\_\_, hereby give my permission for my child to be photographed and/or my child's name used in *The Herald Times/CNCC publication* for Giant Step articles, advertising, on G.S. Facebook page or to be displayed at Giant Step.

Parent/Legal Guardian Signature

Date

I/We \_\_\_\_\_, have received and read a copy of the program's (Giant Step) policies and procedures.

\_\_\_\_\_  
Parent/Legal Guardian Signature

Date

I understand that under state regulations for Child Care Centers, my child/children must **have immunization record (s)** upon the first day of enrollment and **Medical Statement** after 30 days of enrollment.

Parent/Legal Guardian Signature

Date