

BETHEL UNIVERSITY
CHILD DEVELOPMENT CENTER
PERMISSION FORM

I hereby grant permission for my child to use all of the play equipment and participate in all of the activities of the Bethel University Child Development Center.

I understand that the Child Development Center is a Bethel University laboratory school and that my child will be involved in learning experiences with college students from the departments of Education, Psychology, Social Work, Nursing, Music, Theater, etc.

I hereby grant permission for my child to leave the Child Development Center premises under the supervision of a staff member for walks on campus.

I hereby grant permission for my child to be included in evaluations and pictures connected with the school program this may include websites.

I hereby 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 or guardian.
2. Attempt to contact the child's physician.
3. Attempt to contact you through any of the persons listed on the emergency information form you completed for us.
4. If we cannot contact you or your child's physician we will do any or all of the following:
 - a. Call another physician or paramedics
 - b. Call an ambulance,
 - c. Have the child taken to an emergency hospital in the company of a staff member.
5. Any expenses incurred under #4, above, will be borne by the child's family.
6. The Child Development Center will not be responsible for anything that may happen as a result of false information given at the time of enrollment.
7. The Child Development Center **will not** assume responsibility for a child who has not been signed in when he/she arrives for the day.

Signed _____ Date _____
(Mother or legal guardian)

Signed _____ Date _____
(Father or legal guardian)