

Permission Agreement Form For_		
G	(Name of Child)	

I hereby grant permission for my child to use all of the play equipment and to participate in all of the activities of First United Methodist Church Preschool/PDO of Franklin, Tennessee.

I hereby grant permission for the personnel of the First United Methodist Preschool/PDO program 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 parent or guardian
- 2. Attempt to contact the child's physician
- 3. Attempt to contact the parent/guardian through any of the persons listed in the emergency information on the registration form.
- 4. If the parent/guardian or the child's physician cannot be contacted, any or all of the Following will be done:
 - a. Call another physician
 - b. Call an ambulance
 - c. Have the child taken to Williamson Medical Center Emergency Room in the company of a Preschool/PDO and or Church staff member via ambulance.

Any expenses incurred under #4 above will be borne by the child's family.

The Preschool/PDO personnel will make the best efforts to provide emergency medical care, if needed, but the Preschool/PDO personnel cannot be held responsible for anything that may happen as a result of incorrect information at the time of enrollment.

I hereby grant permission for my child to leave the First United Methodist Preschool premises under the supervision of a staff member for walks around the church grounds.

I understand that every reasonable precaution will be taken by the Preschool/PDO and by the church to prevent accidents, I will not hold the Preschool, the Preschool/PDO personnel, or the church liable for unavoidable accidents.

Signed	Date	
(Parent or legal guardian)		