

**Permission/Agreement Form for: \_\_\_\_\_ (child's name)**

I hereby grant permission for my child to use all of the play equipment and to participate in all of the activities of the First United Methodist Church Preschool/PDO of Franklin, TN. I understand that every reasonable precaution will be taken by the Preschool/PDO personnel and by the church to prevent accidents. I will not hold the Preschool, Preschool/PDO personnel, or the church liable for accidents that occur on church/preschool property. I understand that the Preschool/PDO will take every precaution to maintain a clean, healthy environment. I will not hold the Preschool, Preschool/PDO personnel or the church liable for any communicable illness my child may contract.

I hereby grant permission for my child to be included in evaluations and in pictures connected with the Preschool/PDO program.

I hereby grant permission for the personnel of First United Methodist Church 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 a 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 your child's 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.

Any expenses incurred under #4 above will be the responsibility of the child's family.

Preschool/PDO personnel will make the best efforts to provide emergency medical care when needed, but the Preschool/PDO personnel will not be held responsible for anything that may happen as a result of incorrect information or withheld information provided to us at the time of enrollment.

I hereby grant permission for my child to leave the First Methodist Preschool premises under the supervision of a staff member for church grounds walks or for field trips in an authorized vehicle. I waive and release the Preschool/PDO, Preschool/PDO personnel, and the drivers of said vehicles from any other form of claim or demand arising from such transportation. I understand that the Preschool/PDO will be diligent to use drivers who are responsible, careful, and considerate for such transportation. I understand that I must provide a proper child passenger restraint system for my child's use on field trips in accordance with all current State of Tennessee Codes and Laws.

I have received a copy of the State of TN Licensing for Child care Policies and the First United Methodist Preschool Handbook and I have read the policy statement. I agree to abide by these policies. I will cooperate with the Preschool personnel for the development of my child. I will regularly pay the tuition as stipulated in the school handbook. I will notify the Preschool ONE MONTH in advance before withdrawing my child from the program for any purpose. I do understand that I will be held responsible for paying the next month's tuition if I fail to abide by this regulation.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

