Lancaster Preschool

Childcare Waiver

Family Information

Parent(s) Name(s):

Child's Name:

Address: ZIP code:

City: Phone:

Allergies: Y / N Please list:

Employee Name:

Parental Consent and Acknowledgment

(Please confirm agreement by initialing all items below)

- ☐ We/I agree to hold Lancaster Preschool harmless while our child is in the care of the above named employee/staff member.
- ☐ We/I acknowledge that this childcare arrangement is outside of the scope of employment of the above named employee as a staff member of Lancaster Preschool and are freely entering into this arrangement with the above named employee.
- ☐ We/I understand that we are responsible for providing child safety seats/boosters if necessary for transportation or have confirmed that the employee has appropriate safety seating for my child.
- ☐ We/I understand that should this childcare arrangement need to be altered or terminated, we/I will notify the School Director immediately.
- ☐ We/I have provided accurate emergency contact information to the employee in case it is needed while our/my child is in the care of the employee.

Signature

By initialing above and signing below, we/I acknowledge that we/I have read, understood, and consent to the above information and release Lancaster Preschool from any liability and responsibility associated with this childcare arrangement.

Parent Signature: Date:

Office Only:

Director's Initials Employee's Initials