## **Caring Child Daycare**

Early Learning Centers

## RELEASE OF INFORMATION

**Instructions:** This form should be completed and signed by the parent(s) or legal guardian of the child prior to daycare staff discussing specific information about the child with any outside professional or any representative from an outside agency.

\*Note: If there is any information you would like to be excluded, please discuss with the head of the daycare your child attends. Information will need to be submitted in writing.

Date:	<u></u>
I, , the	e parent of
(Parent/guardian name)	c parent of (Child's name)
hereby authorize the following C with my child, specifically: (List of the control of the contro	Caring Child Daycare employees who work employee's names and titles below)
to:	
Provide any and all informat performance or behavior at the d	ion (written and oral) regarding my child's aycare (Unless stated otherwise)
Receive any and all informat	tion about my child (Unless stated otherwise)
to/from	, a representative from
(Agency or Practice nam	ne)
This consent for the release of in	formation covers the following period of time:
	(Specific dates)

Printed Name	