

Nursery Info & Permission Form

Child's Name

Age

Birthday

Authorized Parents/ Guardians (ID may be required.)

Cell Phone Number

(You will be text messaged if there's a problem during the event.)

Circle: YES NO

You give permission to change diapers/ take child to the bathroom.

Medical Issues:

Parent / Guardian Signature _____

Nursery Supervisor Signature _____

Date Notes

(continue on back)