

## AUTHORIZATION AND CONSENT FORM

Yes    No

- \_\_\_    \_\_\_ 1. I understand that consultants hired either by Community Partnership for children or Brighter Beginnings may observe my child's classroom. These observations may be of the teacher and or children including my child.
- \_\_\_    \_\_\_ 2. I understand that students of Early Childhood Education and/or volunteers may also at times be present to visit and interact with the children. I realize that the regular staff will be present.
- \_\_\_    \_\_\_ 3. I understand that center staff are mandated by law to report incidents of Suspected child abuse or neglect to the Department of children & Families.
- \_\_\_    \_\_\_ 4. I agree that any photographs and video tapes taken of my child may be used for publicity, including Displays, Bulletin Boards or other types of Program Publicity along with Media Interviews.
- \_\_\_    \_\_\_ 5. I agree that the center may apply to my child's skin: Diaper cream, triple antibiotic, sunscreen, powder or insect repellent when necessary and appropriate. When supplied by the parent.
- \_\_\_    \_\_\_ 6. I agree that the center may apply tooth paste (fluoride for children over 2 years) to my child's tooth brush.
- \_\_\_    \_\_\_ 7. I understand that the center is monitored by cameras through out the building including classrooms and hallways.

Exceptions/ Explanations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of parent or Guardian

\_\_\_\_\_  
Date

**I have received the Family Handbook for the Brighter Beginnings Child Care Center L.L.C. a copy of the Parents Information, Rights and Responsibilities, Procedures for emergencies and illness and appropriate papers needed to be signed for the enrollment of my child(ren). I have also seen the center and meet the Director or Owner.**

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_