Park Center Preschool & Glenview Park District Informed Consent

Child’s Name:_________________________________________________________________________

Access
I will have access to the Park Center Preschool without notice when my child is present. However, this access may not be used to supplement any visitation schedule or custody arrangement.

Photography & Video Permission
Photos and videos of Glenview Park District participants are periodically taken when in programs and activities. All persons registering for Park District programs/activities or using Park District property thereby agree that any photograph or video taken by the Park District may be used for promotional purposes including in its electronic media, videotapes, brochures, flyers and other publications without additional prior notice or permission and without compensation to the participant.

Children’s Injuries
If my child sustains a minor injury during care, I will be informed of the event upon pick up. I will be contacted immediately if the injury produces any swelling, is on the face and head or required medical attention. If your child requires emergency medical attention, I understand an ambulance will be called any my child transported to the nearest hospital for medical treatment. If emergency medical attention is needed for my child, Park Center Preschool will attempt to contact me or the emergency contacts listed (if I cannot be reached). I understood all staff are trained in pediatric CPR and first aid which will be used, if needed, in an emergency.

Child Illness
If my child becomes ill, I will be called. I may be required to pick up my child as soon as possible (within 45 minutes at most). A child must remain out of the Park Center Preschool until he/she is symptom free for 24 hours, unless a doctor’s note is provided which states that the child is
1) not contagious; and
2) can participate with other children & adults
The Park Center Preschool parent manual contains the Park Center Preschool’s full Child Illness Policy including protocols for contagious illnesses.

Acknowledgement
By signing below, I acknowledge and agree that:
1) in addition to these agreements, I received the Park Center Preschool Parent Handbook, as well as any state policies;
2) it is my responsibility to read and familiarize myself with all these materials and address any questions with Park Center Preschool management; and
3) will abide by these materials

_________________________________________  ______________________________
Parent Signature  Date