

CHARLIE BROWN PRESCHOOL & CHILDCARE

PREVENTION OF PERSONAL INJURY POLICY

DISCONTINUING SERVICES POLICY

I have received, read, and understand the Prevention of Personal Injury Policy and the Discontinuing Services Policy. Staff have permission to initiate techniques to insure the prevention of personal injury.

Signature of parent/guardian

Date

Signature of parent/guardian

Date

FAILURE TO GIVE THIS CONSENT WILL RESULT IN PARENT NOTIFICATION AND CHILD REMOVAL FROM CENTER WITHIN 15 MINUTES.

Child's Name _____