(Guardian)

Signature:



Blooming Babies

Educational & Care Services 483 Belvedere Pl, London, N6K 2G2 Ontario, Phone: 226-785-1625

Contract Nr.

TEMPORARY RELEASE OF CHILD

This form is to be filled any time a temporary release of child in care is necessary. Applies to release of child to a third party other than school or contracted institutions. The present acts as a legal prove and disclaimer.

	I undersigned,				
	First Name:	Last Nar	Last Name:		as a third party
	Express my wish to invite:				
	To: Place (address):				
	Time:	Date:	Return child to day	care: Yes No	: Please mention where
you will relea	ase the child and the time	2:			
well being of	I understand that I am the child for the mention	•	ld mentioned above	and I will do my bes	t to assure the safety and
	While in my care the ch	ild will:			
	Receive food (lunc issues. Nap Travel in my perso Other (please men	nal vehicle	cording to parent's in	nstructions and consi	dering allergies and other
	I acknowledge the information provided above is true and I accept all terms and conditions of the present form				
	Signature:	Date	:		
	4- 4	-			
	I undersigned,				
	Parent (guardian)			of:	
care services exception of	s and conditions specifies to Blooming Babies. A	d. The temporary relo Il paragraphs in the to the third party fo	ease form will not ex Child Care Agreeme or the period mentio	empt me from paying the remain active fo	nird party mentioned above ng the full amount for child r the time of release with unpleasant event I will not
	Parent Signature:				
	100 m	5-			
	Blooming Babies Child C				
the third par	We acknowledge the te ty. We will release the ch		· · · · · · · · · · · · · · · · · · ·		the parent (guardian) and

Date: