

Parent Consent for Back-Up Care

| Date | Date | Date | |
|---|---|----------------------------|-------------------------------------|
| Parent Signature | Alternate Provider Signa | ture Coordinat | or Signature |
| hours in any 24-hours give each child his or h | ne agency and a provider offering must provide each child with slee ner own bedding and sleeping ac and male and female school-age | eping time (in these cases | s, the provider must the child's |
| - | the provider and the parent. care for a child longer than 18 h | nours in any 24 hour peric | od without prior |
| Standards, CFSA Reg regular provider apply. | s, and regulations as per the Lan ion 5 standards and as outlined i egistered children outside their si | n original forms and conti | racts signed with the |
| Alternate provider has been giv | ven a copy of each child's registr | ation form. Check: | |
| Re | gular provider name is | | |
| | lowing days of the week | | |
| | on and | | _· Child |
| | D. O. B | | |
| | D. O. B | _ | |
| | D. O. B | _ | |
| The | above-named provider agrees t | o provide childcare for | |
| | (Parent(s)). The a | | • |
| This agreement is between (alternate | | | ovider) and |

