

Blake Farm Dayschool

Illness Notification Agreement

1. Blake Farm Dayschool agrees to notify parent(s)/guardian(s) whenever your child becomes ill and the parent(s)/guardian(s) will arrange to have your child picked up as soon as possible, if so requested by the school.
2. The parent(s)/guardian(s) authorize Blake Farm Dayschool to obtain immediate medical care if any emergency occurs when the parent(s)/guardian(s) cannot be located immediately. ***
3. Other: _____

Signatures

_____	_____
Parent/Guardian	Date
_____	_____
Administrator of Center	Date

****If there are any objections to seeking emergency medical care, a statement should be obtained from the parent(s) or guardian(s) that states the objection and the reason for the objections. *****