## 2022-2023

# **Sharon Baptist Church**

Parent's Day Out

Summer T/TH	June 7 – Ju	ıly 28, 2022 (closed July 5	5 & 7)
School Yea	r: August 15	5, 2022- May 4, 2023	
Options: M/W_	or T/TH	or any 1 day	
	CHILD INFOR	RMATION	
Last Name	First	Name	
Address			· · · · · · · · · · · · · · · · · · ·
City	Zip	Home Phone	
E-Mail			
Birthday//	Siblings/Ages		
Allergies/Medical Concerns:			
Father's Name		Cell	
Place of Employment		Phone	<del></del>
Mother's Name		Cell	
Place of Employment		_Phone	
Anything we should know?			
For your child's safety, please list po	ersons other than	parents, to whom the child may	y be relea

Name	Relationship	Home	Work	Cell

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# **Parent's Day Out**

#### **Permission Slip**

I/We	, do hereby give my/our		
permission for	, m	y/our child	
to be treated in an emergency by Childre	en's Hospital and		
or Knox County Ambulance Service. I/V	We understand that in case of an		
emergency, I/We will be contacted as soo	on as possible.		
	Parent or Guardian	Date	
	Parent or Guardian	Date	
Insur	rance Information		
Name of Insurance Company			
Policy Number	Group Number		

#### 2022-2023

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#### Parent's Day Out

#### **Parent Acknowledgment**

I/We have read the Parent Handbook of Sharon Parent's Day Out and agree to all terms and conditions listed within its contents.

\*I understand that this program/facility is exempt and not required to be licensed by the State of Tennessee as a childcare agency.

Parent's Signature	<b>Date</b>
-	
	Date