Transportation Agreement

Kids 'R' Kids of _____

_____

(Location Address)

_____

(Location Phone Number)

I, _____, give my permission for Kids 'R' Kids of _____ to seek medical attention for my child, _____, in the event of an emergency if I cannot be reached, and to hold harmless and release Kids 'R' Kids of _____ and Kids 'R' Kids International, Inc. from all liability. I further agree to keep the facility informed of changes in telephone numbers, etc., where I can be reached.

In the event of an emergency, notify

Name_____Relationship_____Telephone_____

Name_____Relationship_____Telephone_____

List any special problems that your child might have, such as allergies, existing illness, previous serious illness, injuries during past 12 months, mental health disorders, mental retardation, developmental disabilities, any medication prescribed for long-term continuous use, and any other information which staff should be aware of:

Transportation for school age children:

My child is to be transported from Kids 'R' Kids of _____ in the morning and delivered to_____ by _____am.

My child is to be picked up from _____ by _____pm and be delivered to Kids 'R' Kids of _____.

Transportation Guidelines

In the event the designated location is unable to receive children they will be returned to Kids 'R' Kids of _____. Children will not be left unattended on any vehicle used for transportation and the children will wear seat belts. It is vital that Kids 'R' Kids of _____ be notified of any changes in the above scheduled transportation. Kids 'R' Kids of _____ will assume the above schedule of transportation will be followed unless we receive different instructions from parents (instructions should be received by Kids 'R' Kids of _____ at the earliest possible time.)

Your child must be at the center no later than 7:00 am to be transported in the mornings.

YOU WILL RECEIVE A COPY OF THE RULES THAT CHILDREN ARE EXPECTED TO FOLLOW WHILE IN THE VEHICLE. WE ASK THAT YOU REVIEW THESE RULES WITH YOUR CHILD/CHILDREN.

IT IS OUR GOAL TO PROVIDE A SAFE ENVIRONMENT FOR EACH CHILD WHILE IN THE VEHICLE.

Parent Signature_____ Date_____