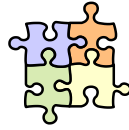


# BOW VALLEY FAMILY CHILD CARE AGENCY

*A Division of Davar Child Care Society*



**AN ACCREDITED NOT-FOR-PROFIT SOCIETY & REGISTERED CHARITY  
CELEBRATING 25 YEARS OF CARING FOR CHILDREN AND THEIR FAMILIES**

## **A C K N O W L E D G E M E N T   A N D   P E R M I S S I O N**

### **Pick-Up of Children**

The Bow Valley Family Child Care Agency policy is to release your child only to a person authorized by you, the parent or guardian. Photo ID will be required by the individual who is authorized to pick up your child. (Name)\_\_\_\_\_.

We are required to release a child to either **Mom or Dad**, unless you have Legal Custody or a Restraining Order. Please provide a copy of either document for your child's file. However, if the non-custodial parent arrives to pick up the child and is insistent, we must release the child to him/her, as only authorities such as the Police can enforce legal custody documents. We will immediately notify the Police and the custodial parent after the child has been removed from the day home.

### **Off-Site Excursions**

I hereby give the Bow Valley Family Child Care Agency permission to take my child on regular daily outings, such as walks and visits to community parks, under supervision of the family day home provider.

Parent/Guardian Signature: \_\_\_\_\_

### **Information**

I acknowledge that the information provided for my child is accurate to the best of my knowledge. I will notify the Bow Valley Family Child Care Agency in the event of any changes pertinent to my child. I have read, understand, and agree to the conditions outlined in this document and in the Bow Valley Family Child Care Agency's Parent Handbook.\*

Parent/Guardian Signature: \_\_\_\_\_

\*Please note that if the parent is unable to understand the Parent Handbook or Contract information in its' written form, it is appropriate and acceptable for the parent to receive the information verbally (from either the Child Development Consultant or a language interpreter). The parent or guardian, after receiving the information through an alternate method, may then sign this contract form.

BOX 8009 • CANMORE, ALBERTA • T1W 2T8

PHONE: 403.609.7392 • FAX: 403.273.8113 • E-MAIL: bowvalley@davarchildcare.org



DAVAR CHILD CARE SOCIETY • PHONE: 403.250.5211 • FAX: 403.250.5253

