



Basic Release Form

For my child: _____

This release allows Portside Learning Center's staff to administer CPR if needed. It is understood that the person doing so is certified. It also allows them to apply the following non-prescription items: Diaper rash ointment or cream, Sunscreen, First aid creams or band-aids as needed.

Other: _____

Prescription medications will be administered at the discretion of Portside Learning Center's staff on an individual basis and must be in original containers. A medication log will be used for this, and kept in your child's file. It is also understood and permission given that my child may be driven in Portside Learning Center's staff vehicle if the need arise. This release also releases child care and persons as stated above from any liability from any accident or injury which may occur regarding the above.

Parent signature: _____

Provider signature: _____