

CHILD CARE AUTHORIZATION LETTER

To Whom It May Concern:

I, the undersigned, hereby authorize the individual named below to provide care for my minor child(ren) as specified herein. This authorization is granted to ensure the health, safety, and well-being of my child(ren) during my absence.

Parent / Guardian Information:

Full Name: _____
Address: _____
Phone Number: _____
Email Address: _____

Authorized Caregiver Information:

Full Name: _____
Relationship to Child: _____
Phone Number: _____
Email Address: _____

Child(ren) Information:

Full Name(s): _____
Date(s) of Birth: _____

Duration of Authorization:

This authorization is valid from the date of signing until revoked in writing by the undersigned parent or guardian.

Scope of Authorization:

The authorized caregiver is permitted to perform the following actions on behalf of the undersigned parent or guardian for the care of my child(ren):

- Provide daily care, supervision, and discipline as needed.
- Administer medication as prescribed and provide basic first aid if necessary.
- Consent to medical treatment, emergency care, and hospitalization if the undersigned parent or guardian is unavailable.
- Transport the child(ren) to and from school, medical appointments, and other activities.
- Make decisions regarding the child(ren)'s welfare during the period of this authorization.

Emergency Contacts:

Name: _____
Relationship: _____
Phone Number: _____

Liability and Indemnification:

The undersigned parent or guardian acknowledges that the authorized caregiver shall exercise reasonable care and

diligence in caring for the child(ren). The undersigned agrees to indemnify, defend, and hold harmless the authorized caregiver from any claims, damages, or liabilities arising from acts performed in good faith under this authorization.

Miscellaneous:

This authorization letter shall be governed by and construed in accordance with the laws of the United States of America and the applicable state laws. If any provision of this letter is found invalid or unenforceable, the remaining provisions shall remain in full force and effect.

PARENT / GUARDIAN SIGNATURE

AUTHORIZED CAREGIVER SIGNATURE

Signature: _____

Signature: _____

Witnessed By:

Full Name:

Signature:

Date:

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