PERMISSION TO RELEASE INFORMATION

Date:	
I understand that the time my child is in Caterpillar Learning Child Care, the Director may be asked for information regarding my child.	
I hereby give permission to release information to official identify themselves, such as schools, health care personr governmental officials.	
Signature of Parent/Guardian — — — — — — — — —	Date
I do not give permission to release information about my aforementioned statement. I realize that the bureau of Se Child Care has access to my child's record as the licensing	ervices for
Signature of Parent/Guardian	Date