

**ENROLLMENT CONSENT FORM**

**EMERGENCY CASES:**

In case of emergency, due to serious illness or injury, I hereby give my permission to the Director or her staff to call the paramedics (911) to transport my child to the nearest medical facility.

\_\_\_\_\_  
Guardian's Signature/Date

**PICK-UP:**

I understand that only those persons who have been authorized by me in writing will be allowed to pick up my child.

**Name:**

**Address and Phone Number:**

- |    |       |       |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |

\_\_\_\_\_  
Guardian's Signature/Date

**Field Trips:**

I hereby authorize Apple Tree Learning Center to take my child to field trips, playgrounds and walks (deemed safe children to play in or walk in the surrounding areas of the school for daily exercise).

I hereby give permission for \_\_\_\_\_ to be taken from the  
Child's Name  
school premises in case of a special class fieldtrip.

\_\_\_\_\_  
Guardian's Signature/Date