

Statement of Exception to Release Child to Person(s) Under the Age of 18 (2018-2019 Program Year)



Head Start Early Head Start ECEAP (not needed for ECEAP if subcontractor has a Policy Waiver)

Parent/Guardian Statement

I have explored all options available to me for releasing my child _____ **(print)** to an authorized adult age 18 or older and determined that none of these options will work. If only an authorized adult age 18 or older may pick up my child, then I will have to remove my child from the program. Therefore, as a last resort, I authorize my child to be released to the person(s) listed below who are under the age of 18.

I assume all responsibility and liability for my decision to have my child released to the below-identified individuals. I agree to hold harmless, release, and forever discharge _____ **(print subcontractor organization)** and the Puget Sound Educational Service District, including their directors, employees, and agents, from any and all claims, actions, liability, and damages, including attorney's fees, arising out of or in any way connected with my decision.

Print Parent/Guardian Name

Signature of Parent/Guardian

Date

Print Interpreter Name (if applicable)

Signature of Interpreter

Date

I give permission for my child to be released to the following people for the current program year.
(People listed below must show proper identification before your child will be released from the center or the bus.)

Name	Relationship to Child	Phone Number

Staff Instructions: Attach form to Safe Arrival & Departure Agreement page of *Family Connections and Emergency Treatment & Consent Form*.