

Julia Green Extended Care

I certify that the information I provided in the enrollment application is true and complete to the best of my knowledge.

Additionally, in the event an accident with my child(ren) should occur, I agree to hold Julia Green Extended Care, Inc. (JGEC), and its staff harmless from any liability due to injury to my child(ren). Further, I agree that in the event of an emergency, if I cannot be reached, I allow JGEG personnel to take whatever steps are necessary to obtain medical care for my child(ren) at an appropriate medical facility or emergency room.

Name of child(ren) in Program:

Parent's PRINTED name:

Parent's SIGNATURE:

Date:
