

WOODBRIDGE PLAY-CARE

MYPROCARE INFORMATION RELEASE FORM

We, _		_, the parents of _	,
	(Parent(s) / Legal Guardian(s))		(Child's / Dependent's Name)

authorize Annandale Play-Care, Inc. to create a Parent MyProcare Account and upload the contents of my child's record to the customer relationship management tool Procare.

Documents to Transfer

- ✓ WPC Child Registration Form
- ✓ WPC INOVA Emergency Treatment Authorization Form
- ✓ WPC Behavior Contract
- ✓ WPC Parent Authorizations Form
- ✓ WPC Parent Policy Acknowledgement Form
- ✓ Emergency Action Plan (if any)
- ✓ Medication Authorization Form (if any)
- ✓ USDA Food Program Form
- ✓ VA State Physical Form & Immunization Record

Your signature below is to indicate that you understand and grant permission for ALL content contained on the documents listed above to be uploaded for the purpose of account creation to the Procare system by Annandale Play-Care, Inc.

SIGNATURES

*Email Address is required to setup Parent MyProcare Account. It will not be used for any other purpose.

Mother's Name (PRINT):	*Mother's Email (PRINT):	Mother's Name (SIGN):	Date:
Father's Name (PRINT):	*Father's Email (PRINT):	Father's Name (SIGN):	Date: