

Emergency Transportation Acknowledgment

(OAR 414-360-0230 & Chickadee Ridge Policy)

Child's Name: _____

Statement of Policy:

Chickadee Ridge Early Learning Center does not provide transportation under normal circumstances.

In the event of a medical or other emergency where transportation is necessary, a licensed and insured vehicle that meets all state safety requirements will be used.

Children will be secured in **parent-provided, age-appropriate restraints**.

Acknowledgment:

I acknowledge that I have read and understand the above policy. I give permission for my child to be transported in an emergency under these conditions.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____