

**Notification of Emergency/Substitute Caregivers Used
By Child Care Providers**

I, _____, am aware that my child
(Parent/caretaker name)
care provider, _____, have
(name of provider)
chosen to use _____ and
(name of emergency/substitute)
_____ as their emergency/substitute
(name of emergency/substitute caregiver)
caregivers. I understand that these emergency/substitute
caregivers may provide care for my child(ren) in the event
that my child care provider is not available due to an
emergency or other situation that may require her/him to be
away or unavailable.

(Parent/caretaker's signature)

(date)

(Child care Provider's signature)

(date)

**Please list any additional emergency/substitute caregivers that the provider may also use.

