



child development dayhomes
peace of mind

In-Home Backup Authorization

Back up caregivers must be at least 18 years of age

In-Home Backup Provider's Name: _____

Regular Educator's Name: _____

I, _____ give permission for my child(ren)
(Parent/Guardian's Name)

_____, _____

to be cared for by the approved in-home backup provider from _____ to _____
(Start Time) (End Time)

Dates of care for multiple days: _____ to _____

Date of care for single day: _____

Date Signed

Parent/Guardian Signature

Date Signed

In Home Back up Provider's Signature