



Parent/Guardian Release and Indemnity Agreement  
Infant Sleeping Position

We/I understand that the standard practice at Watch Me Grow Child Development Center (WMGCDC) is to put an infant to sleep on his/her back as recommended by the American Public Health Association and the American Academy of Pediatrics. We/I have received and read material strongly urging that our/my child be place on his/her back. We/I would like WMGCDC to make an exception to that practice and place our/my child on his/her side \_\_\_\_\_ (Check if applicable) or stomach \_\_\_\_\_ (Check in applicable).

We/I, the undersigned being all of the custodial parent(s) or other legal guardian(s) of (child's name) \_\_\_\_\_, a minor, do hereby release and agree to hold harmless, and to indemnify WMGCDC employees, from any and all actions or claims, on account of personal injuries to said minor resulting from this decision concerning infant sleep position.

Each parent/guardian with custodial rights is required to sign below for the exception to be permitted. Consistent with WMGCDC policy and NAEYC (National Association for the Education of Young Children) accreditation standards, the approval of your child's physician is required to implement your request.

\_\_\_\_\_  
Signature of the Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Physician

\_\_\_\_\_  
Date



Physician's Stamp