

Po Leung Kuk Social Services Department (Babies Section)
Happy Baby Land Temporary Child Care Service

Consent Form

I, _____ (I.D. no.: _____)
apply for the temporary child care service provided by the Babies Section for my son /
daughter _____. During the time of service, if
my son / daughter falls ill or suffers from acute illnesses, I will pick him / her up as
soon as possible. If I cannot be reached, I agree that my son / daughter to be sent to
the emergency public hospital and is not liable for casualties caused by uncontrollable
accidents. I have to pick my son / daughter up on time, and I will be responsible for
all issues might come up after leaving the Section. If I fail to pick my son / daughter
up on time with prior notice, the Section reserves the right hand my child to police or
Social Welfare Department.

Signature of Parents / Guardian / Trustee : _____

Name of Staff : _____

Signature of Staff: _____

Date : _____

Remarks : This form is in duplicate, the original is for documentation and the copy is for the
parents / guardian / trustee.