

**Parental Declaration Form**

This form is to be used when children are returning to the setting after any absence.

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| Child’s name: |
| Parents/Guardians Name: |
| **DECLARATION**I have no reason to believe that my child has infectious disease and I have followed all medical and public health guidance with respect to exclusion of my child from childcare services.I confirm that my child had no Covid – 19 symptoms; no cough and no temperature 38 degrees or above within the last 48 hours and any Antifebrile Medication (i.e. Calpol, Nurofen) was not given to my child within the last 24 hours.Signed:Date: |