

**Lane Family Connections  
FAMILY CHILD CARE INTERNET  
PERMISSION FORM**

**Office Use Only**

Record

Date Added

Staff Initials

First Name:

Last Name:

Address:

Business Name:

**Do we have Permission to put information about your child care on the internet for online searching? Give Web referrals?  YES  NO**

I understand that Lane Family Connections (LFC) only makes referrals, not recommendations to families. I agree to assist LFC in maintaining up to date information on child care availability by reporting changes in my Child Care business when they occur. I give LFC permission to release the information on this form to parents seeking child care services. In addition, LFC occasionally releases the names and addresses of listed providers to carefully screened child care related agencies and organizations. Unless otherwise indicated, I give LFC permission to release my name and address to such agencies and organizations.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_