

**AUTHORIZATION TO LIST FAMILY CHILD CARE HOME ON
LOS ANGELES COUNTY CHILD CARE WEBSITE**

I, _____, doing business as, _____ at
Name Business Name

Address _____ City _____ Zip Code _____

authorize the County of Los Angeles to publish my name and phone number on the Los Angeles County Child Care Website.

I understand that the County of Los Angeles is not endorsing or recommending my family child care home, but is providing a public service by listing my name and phone number on the Los Angeles County Child Care Website.

I acknowledge and agree to release the County of Los Angeles and its Special Districts, elected and appointed officers, employees, and agents from and against any and all liability, including, but not limited to, demands, claims, actions, fees, costs, and expenses (including attorney fees), arising from or connected with the publication of my name and phone number on this website, and all acts and/or omissions arising from and/or relating to such publication.

Signature _____ Date _____

Family Child Care Phone Number

Family Child Care License Number

Attach a copy of your Family Child Care License and valid Driver's License or California Identification, along with this completed authorization form and mail to:

Department of Public Social Services
Child Care Program Section
12820 Crossroads Parkway South
City of Industry, CA 91746
Attention: Nadia Varela