

IMPRESSIONABLE YEARS  
1041 Route 3 North, Suites 4-9  
Gambrills, MD 21054

Dear Parents,

During the transition process of switching from cribs to cots, licensing requires us to have written permission from all parents. Please provide your child's name and sign below authorizing your child to sleep on a cot, we would great appreciate it.

I \_\_\_\_\_ give Impressionable Years permission to allow my  
child \_\_\_\_\_ to sleep on a cot during nap time.

Parents Signature \_\_\_\_\_

Director's Signature \_\_\_\_\_