**Medical Consent Letter for Babysitter**

[Name of Parent]

[Address of Parent]

[City, State, Zip Code]

[Date]

[Name of Babysitter]

[Address of Babysitter]

[City, State, Zip Code]

RE: Consent for Medical Treatment of Name of Child

Dear [Babysitter],

We are writing to provide you with our medical consent letter for the care of our child, [Child’s Name]. In the event that our child requires medical attention while in your care, we hereby give you our permission to seek medical treatment on our behalf. This includes, but is not limited to, consent for medical procedures, tests, and vaccinations. We understand that you will use your best judgement in seeking medical care for our child, and we trust that you will act in our child’s best interests at all times.

If you have any questions or concerns, please do not hesitate to contact us.

Thank you for your time and attention to this matter.

Sincerely,

[Parent’s Signature]

[Parent’s Name Printed]

[Relation to The Child I.E. Mother]

[Father of Child Date of Signing]

Copies To:

[Name of Hospital]

[Name of Doctor]

[Name of Babysitter]

[Name of Insurance Agent or Company]