Child's Name		
Child S Maine		

LIABILITY INSURANCE DECLARATION

THIS FORM COMPLIES WITH THE REQUIREMENTS OF § 63.2-1809.1 OF THE CODE OF VIRGINIA AND MUST BE MAINTAINED ON FILE IN THE FAMILY DAY HOME AT ALL TIMES WHILE THE CHILD IS IN ATTENDANCE AND FOR 12 MONTHS AFTER THE CHILD'S LAST DAY OF ATTENDANCE.

business in an amount that meets or exceeds the minimum amount established by the Virginia Department of Social Services effective	I have liability insur amount that meets (er the Child's last day of attenda ance coverage in force on my fa r exceeds the minimum amount ll Services (\$100,000 per occurr No	amily day home business in an t established by the Virginia
above-referenced notification on (Date) I no longer have liability insurance coverage in force on my family day home business in an amount that meets or exceeds the minimum amount established by the Virginia Department of Social Services effective	T	ack	nowledge having received the
above-referenced notification on (Date) I no longer have liability insurance coverage in force on my family day home business in an amount that meets or exceeds the minimum amount established by the Virginia Department of Social Services effective	(Signature of na		nowledge having received the
☐ I no longer have liability insurance coverage in force on my family day home business in an amount that meets or exceeds the minimum amount established by the Virginia Department of Social Services effective			
□ I no longer have liability insurance coverage in force on my family day home business in an amount that meets or exceeds the minimum amount established by the Virginia Department of Social Services effective			
(Signature of parent or guardian) above-referenced notification on	business in an ar	nount that meets or exceeds the	minimum amount established
	(Signature of pa	ent or guardian)	nowledge having received the
(Data)	above-i citi tiictu i	(Date)	