

# Parental Consent Form

Child's Name \_\_\_\_\_

Parents' Names \_\_\_\_\_

## Pick-up Permission

I give permission for my child to leave Community Lutheran Preschool with the people listed below. (Please list adults you might ask to pick up your child in your absence. It is the responsibility of the parents to notify the school, in writing, of any changes. We will not let a child leave with any adult not on the list.)

Name	Relationship	Phone Number
------	--------------	--------------

_____	_____	_____
_____	_____	_____
_____	_____	_____

## Activity and Travel Permission

I give permission for the staff of Community Lutheran Preschool to apply the following non-prescription medications to my child before going outdoors. I will supply Community Lutheran Preschool with the necessary items to do so.

\_\_\_\_\_ Sunscreen with UVB and UVA protection of SPF 15 or higher

\_\_\_\_\_ Insect repellent containing DEET can be applied once a day when the public health authorities recommend its use

I give permission for my child to leave Community Lutheran Preschool with teachers/staff in the following manner:

\_\_\_\_\_ Walking field trips around Readlyn (fire station, city park, post office, library, etc.)

## Picture Release

I give permission for my child to be photographed or videotaped for the following reasons:

\_\_\_\_\_ School scrapbooks, yearbook, newsletters

\_\_\_\_\_ Classroom publications and communications

\_\_\_\_\_ Newspaper articles

\_\_\_\_\_ Other public media (Please note the Christmas and spring musical programs are recorded and published on YouTube and Facebook.)

## School Directory Permission

\_\_\_\_\_ Yes please include our family information, including names, address and phone numbers \_\_\_\_\_ in the school directory.

\_\_\_\_\_ No please do not include our family information in the school directory.

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