

Photo Permission Slip

I understand that my child’s photograph will be taken from time to time by any staff member for school purposes only. I give my permission for any staff member to take pictures of my child during school hours. I also understand that my child’s photograph may be posted on the Sunnyfields Learning Center website, and Sunnyfields Facebook Page to exemplify our wonderful daycare environment.

_____ Date _____
Print name of Child

_____ Date _____
Signature of Parent/Legal Guardian

Sunscreen Permission Slip

I, _____,
parent/legal guardian
of _____, am
providing PEANUT FREE SUNSCREEN for my
child. I ensure staff that I have applied
sunscreen to my child in the morning before
school. I also give the staff at Sunnyfields
Learning Center permission to apply
sunscreen to my child when necessary.

_____ Date _____
Signature of Parent/Legal Guardian

Blanket Walking Permission

I hereby give my permission for my child (name) _____, to participate in walking trips in the neighborhood/parking lot around Sunnyfields Learning Center. I understand that the walking route includes no safety hazards and that the walks will not involve entrance into any other facility other than the following:

Whippany Fire Department –
440 Route 10 West Whippany, NJ

_____ Date _____
Signature of Parent/Legal Guardian

Office of License: Proof of Receipt

I have read and received a copy of the Information to Parents document prepared by the Office of Licensing Child Care & Youth Residential Licensing in the Department of Human Services.

Name of Child:

Name of Parent(s):

Signature of Parent:
