

# Parental Agreement Form

Permission Form for: \_\_\_\_\_ Date: \_\_\_\_\_

## Emergencies

I hereby give my permission to Puddle Jumpers Learning Center staff to act in a medical emergency situation and for appropriate medical staff to administer emergency medical treatment to my child.

Signed: \_\_\_\_\_

## Impromptu Walks

I hereby give my permission for my child to go on impromptu walking field trips in the neighborhood. This includes walks around the block and nearby parks.

Signed: \_\_\_\_\_

## Photographs

Your child may be photographed in the program, program functions and field trips and the photographs and displayed. I understand that the photographs may be taken by school staff, professional photographers, news media or other parents.

I give the following permission for my child's photograph to be used in the following ways:

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| • Classroom wall photos                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Puddle Jumpers Learning Center Website       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Puddle Jumpers Learning Center Facebook page | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Child Care Center Communication App          | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Marketing Materials                          | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Newspaper articles                           | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • College student reports                      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Signed: \_\_\_\_\_