**Right At H****me Preschool**

**Permission Form** Child’s name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I give the staff of Right At Home Preschool, my permission/non-permission to apply or perform the following to/with my child/ren while in the daycare. All ointments used are the formulated for young children. (One form per child.)

Please circle YES or NO. N/A if it doesn’t pertain to your child.

|  |  |  |  |
| --- | --- | --- | --- |
| CPR | **YES / NO** **N/A** | Sunscreen SFP 15 or higher | **YES / NO** **N/A** |
| Basic 1st aid and/or cream/spray | **YES / NO** **N/A** | Brush teeth | **YES / NO** **N/A** |
| Neosporin or antiseptic cream | **YES / NO** **N/A** | Child/ren can play in sandbox /or water | **YES / NO** **N/A** |
| Tylenol for small pains/low fevers | **YES / NO** **N/A** | Transport children in van for outings | **YES / NO** **N/A** |
| Insect repellent | **YES / NO** **N/A** | Photograph/video to be posted in our daycare house and on our private Facebook page setup only for current parents who have children enrolled. (Pictures will become property of preschool.) | **YES / NO** **N/A** |
| Children’s gas reliever (i.e. Gas-X) | **YES / NO** **N/A** | Children’s cold or allergy medicine | **YES / NO** **N/A** |
| To take assessment | **YES / NO** **N/A** | Participate in class celebrations | **YES / NO** **N/A** |

**Diapers** - I want the daycare to provide diapers for my child. (Includes training diapers)

(Please ) Yes or No What size (not brand ) diaper?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Preschool to parent digital/internet based contact-**

I would like the preschool staff to text, email or contact me with daily information such as not limited to payment reminders, closed days, or pictures. Yes or No

Parent phone number for texting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Facebook Profile Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand that checking “No” for any items listed above makes me responsible for providing these items and alternatives methods of communications for my child while at preschool when needed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature Date