Right At Home 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 formulated for young children. (One form per child.)

CPR	YES / NO N/A	Sunscreen SFP 15 or higher	YES / NO N/A
Basic 1 st 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 house, social media pages, and marketing material. (Pictures will become the property of the 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

Please circle YES or NO. N/A if it does not pertain to your child

Preschool to parent digital/internet-based contact-

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

The 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 alternative methods of communication for my child while at preschool when needed.

Parent/Guardian Signature

Date