

PERMISSION FORM

SUMMER 2012



Child's Last Name:	Child's First Name:				
FIRST AID & EMERGENCY MEDICAL TREATMENT					
<p>I authorize staff members at Highrock Covenant Preschool to administer First Aid to my child when appropriate. I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child. However, if I cannot be reached, I hereby authorize Highrock Covenant Preschool to transport my child to _____ or to the nearest hospital in order to secure necessary medical treatment for my child.</p>					
<p>PICK UP & RELEASE PERMISSION: In addition to my child's parents, I hereby give permission to release my child, to the following individuals upon dismissal from his/her program. Any individuals not listed below will require written consent from me prior to my child being released into his/her care. In the case of a non-custodial parent, please attach legal documentation of the custodial agreement, to which the preschool staff should adhere.</p>					
1.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%; padding: 5px;">Name:</td> <td style="width: 50%; padding: 5px;">Relationship:</td> </tr> <tr> <td style="padding: 5px;">Home Phone:</td> <td style="padding: 5px;">Cell Phone:</td> </tr> </table>	Name:	Relationship:	Home Phone:	Cell Phone:
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Home Phone:	Cell Phone:				
WALKING TOURS PERMISSION					
<p>I give my permission for my child to participate in walking tours of areas in and around the school neighborhood throughout the term. This might include visiting parks, reservoirs, the Covenant School, or any venue in the area that the teacher might take the students within a reasonable walking distance. Teachers will inform parents of such events ahead of time. I understand that I have the right to revoke my consent at any time during the school year.</p>					
CONSENT TO RELEASE PHOTO/IMAGE					
<p>I hereby grant Highrock Covenant Preschool permission to publicize my child's photo, image or work for the educational or promotional purposes I indicate below. I understand that I will not be given prior notification of the publication. I may revoke my permission at any time for future publications. My child's name will never be included with his or her image or work for external purposes.</p> <p>INTERNAL PURPOSES: Your child's first name may accompany a photo or work that is displayed only in the classrooms or hallways of Highrock Covenant Preschool. Our monthly newsletters are intended for our school community, which may include friends and families, current students, alumni families and other supporters of the school. The newsletter is also occasionally given to interested families.</p> <p>EXTERNAL PURPOSES: No name will ever be included with your child's image or work on the Highrock Covenant Preschool website(s) (www.preschoolrocks.org and/or HCP's Facebook page), external educational or promotional uses (such as brochures, posters, fundraising letters and newspaper or magazine submissions), and video recordings for display, educational or promotional uses. For photos or images used for external purposes, the parent agrees to release them into the public domain and understands that no monetary compensation will be given at any time, now or in the future, for the use of these materials.</p>					
PLEASE CHOOSE ONE:	<p>My child's photo, image or work may:</p> <p><input type="checkbox"/> Be used for internal purposes, only as described above, including the school's monthly newsletters.</p> <p><input type="checkbox"/> Be used for both internal purposes and external purposes, as described above.</p>				
PARENT/GUARDIAN SIGNATURE:					
Signature:	Date:				