

Loving Hands Preschool Parent Consent Form

CHILD'S NAME	Birthdate
Parent Signature:	Date:
I also consent for my child's name to be listed in the	e event of a published photograph.
Parent Signature:	Date:
	OR
the classroom setting. I understand that If my child	re, as long as nothing is identifying my child (Example
Parent Signature:	Date:
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educational purposes (examples include, <u>but are</u> program rehearsals, the fellowship hall or gym for for recess, Room #113 for weather d	choolers to other areas of the church property for not limited to: Chapel for Chapel time, Sanctuary for indoor gross motor activities, the outdoor playground lrills, the Pavilion for outside snack time) reas, and any other areas within Greensburg United a may deem educational or for safety purposes.
Signature of Parent/Guardian:	Date
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be able to allow your child to use Purell Hand Sanit	essible to your child. In those cases, we would like to izer as a substitute until a sink is accessible. The only when hand washing is not an immediate option!
I give permission for my child to use Purell as a subaccessible.	ostitute for soap when a sink is not immediately
Signature of Parent/Guardian:	Date