

DATE \_\_\_\_\_

PERMISSION FORM FOR \_\_\_\_\_  
Child's Name

**OUTDOORS ACTIVITIES:**

Walks within the school boundaries are a regular and carefully supervised part of our program. Walks within the neighborhood may also be taken for educational purposes.

I give permission for my child to leave the school for these informational and educational walks.

\_\_\_\_\_  
Parent/Guardian Signature

**PHOTOGRAPHY:**

Occasionally, videotapes and photographs may be taken for educational purposes, for parent communication, staff training and promotion of Stottlemeyer Early Learning Center. Your child's name and your name would not be used in relation to any picture without your specific permission.

I give permission for pictures of my child and myself to be taken for the above purposes.

\_\_\_\_\_  
Parent/Guardian Signature

Original: Teacher  
Copy: Office