



**BLANKET PERMISSION FORM**

**CHILD'S NAME** \_\_\_\_\_ **TODAY'S DATE** \_\_\_\_/\_\_\_\_/\_\_\_\_

**FIELD TRIP PERMISSION**

I give permission for my child to participate in the First Discovery field trip program. I understand that my child may be transported in First Discovery's vehicles school buses or they may walk. I understand that I will be notified prior to all field trips. This consent applies to all trips.

**I COMPLY** \_\_\_\_\_ **I DO NOT COMPLY** \_\_\_\_\_

**PERMISSION TO PHOTOGRAPH**

I grant permission for my child to be photographed and/or video taped while participating in First Discovery Child Development Center programs. I grant permission for these photographs to be used in classroom or Center displays or Newsletters.

**I COMPLY** \_\_\_\_\_ **I DO NOT COMPLY** \_\_\_\_\_

**PERMISSION TO APPLY SKIN PROTECTION & INSECT REPELLENT**

I grant permission for the staff of First Discovery Child Development Center to apply non-prescription skin protection including sun screen, skin lotion or insect repellent on my child as needed. I understand that generic, non-medicated products will be applied using sterile methods.

**I COMPLY** \_\_\_\_\_ **I DO NOT COMPLY** \_\_\_\_\_

**SIGNATURE OF PARENT OR LEGAL GUARDIAN** \_\_\_\_\_

**ANNUAL UPDATE** \_\_\_\_\_