

PDO & Preschool

General Authorization Form

I hereby grant Hope PDO and Preschool permission for				
 Be photographed or videotaped in connection only) 	the use of all indoor and outdoor equipment. In with daily program activities (for in school use In-with a maximum of 30 minutes a week and only ather.			
Parent/Guardian Signature	Date			
Picture Aut	horization			
I give permission to take my child'shis/her class's private Shutterfly or Facebook page. (
Parent/Guardian Signature	Date			
Sunscreen And will apply sunscreen to my child before coming to so apply sunscreen to my child before going outside, aft supply sunscreen in its original container. Sunscreen	chool each day. I give permission for the staff to re- er 2 hours of school time. It is my responsibility to			
In the event my child runs out of sunscreen, th	e school may apply their sunscreen to my child.			
My child may use only the sunscreen that I pro	ovide.			
I do not wish for anyone to apply sunscreen to	my child at any time of the day.			
Parent/Guardian Signature	Date			
Personal Inform	nation Release			
I hereby grant Hope PDO and Preschool to use my chemail for my child's class directory.	ild's name, my name, phone number, address and			
Parent/Guardian Signature	Date			