## Parental Permission and Release Forms

Permission is given to take my child on supervised wa	lking excursions YesNo Init:
Permission is given to administer sunscreen to my chi	ld YesNo
Permission is given to administer insect repellent to r	ny child YesNo Init:
Parent signature:	
I authorize the following 2 persons to pick up my child (can be different form your emergency	
contacts).	
"	Relationship
Name #1: Work phone #: () Work phone #: ()	Other #: ()
Name #2:	Relationship
Name #2: Work phone #: () Work phone #: ()	Other #: ()
Please send a note each day your child will be going home with someone other than their typical "p	
Do not release my child to the following individuals:	
** All court records must be on file at PCLC before a child is enrolled	J. Please keep your child's file updated at all times.
Medical Release	
Allergies:Is there	e a severe allergy plan on file?Yes No
As a parent/legal guardian, I give consent to Presentation Childhood Learning Center to administer	
to my child emergency first aid by the program staff. I understand that if necessary, 911 will be	
called and, my child may be transported to receive emergency care. I understand that I will be	
responsible for all emergency transportation any charges not covered by insurance. I give consent	
for the emergency contact persons listed on the other page to act on my behalf until I am available.	
I agree to update this information whenever a change occurs.	
If I had my choice, the hospital I prefer my child to be transported to is:	
Media Release	
To publicize the achievements of PCLC students and the great work they perform, we would like to	
occasionally publish students' names, photographs, or achievement in our ministry publications or	
release the information to local media. Occasionally students may be interviewed or photographed	
, , , , , , , , , , , , , , , , , , , ,	
by local media. Information and photographs may be posted on Presentation of Mary's website.	
I give permission for my child to participate in photographs for public purposes Yes No	
Parent Signature:	Date:
Who is primarily responsible for tuition payments?	
Who is primarily responsible for furtion payments?	
Mother's Signature	Date:
Father's Signature	
Guardian's Signature	