

Permission to View Movies and Television Programs

I give Aspen Creek Academy permission to allow my child _____ to watch age appropriate T.V. or movies. I understand this will only be done on special occasions and is not done on a regular basis. This will only be done under staff supervision as they will be watching the T.V. with children at all times. No movie will be rated beyond PG.

Parent/Guardian Signature: _____ Date: _____

Permission to Photograph

I, _____, give Aspen Creek Academy permission to photograph my child _____. I understand these pictures are for use in school slide shows, flyers, bulletins, and special promotions.

I, _____, give Aspen Creek Academy permission to photograph our child, _____ for purposes of identification and to be kept only in my child's file at Aspen Creek Academy.

Parent/Guardian Signature: _____ Date: _____

Permission to Use Sunscreen

My/our child, _____, may have sunscreen applied to exposed skin areas before going outside on warm sunny days. It will be provided 15 minutes before they go outside. Sunscreen will be provided by Aspen Creek Academy. We will use _____.

- Instead of choosing to use the sunscreen Aspen Creek Academy provides I/we will provide a sunscreen with a sun protection factor (SPF) of 15 or more (without Paba is recommended). Paba gives some children blotchy rashes. I/we will mark my/our child's name on his/her sunscreen PLASTIC container with a permanent marker.

Parent/Guardian Signature: _____ Date: _____