

**COMMUNITY PRESCHOOL  
OF CEDAR GROVE**



We Make Learning Child's Play

## PERMISSION FORM

1. I give permission for my child to use all indoor and outdoor play equipment in the program and participate in all school activities.
2. I authorize the staff to administer first aid treatment in case of minor injury, to use hydrogen peroxide and apply antibiotic ointment, if needed.
3. I authorize Community Preschool of Cedar Grove to allow emergency care for my child if I am not available. I also give permission for my child to be transported to a medical facility, if needed.
4. ☐ I give permission for use of my child's name and/or photo or image to be used in Community Preschool of Cedar Grove publicity such as brochures, newsletters, newspapers, the school website, etc.
- ☐ I deny permission for use of my child's name and/or photo or image to be used for any publicity purposes.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent or Guardian)

**Community Preschool of Cedar Grove**

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