Child's Name: _____   **Class Letter**_____

Permission Form #1

Please read the following permission statements carefully and sign and date below. This form must be returned by September 1st.

1. My child has permission to take short walks with his/her class (with the teacher and the teacher assistant) to the fenced in playground on the school property. Yes _____ No _____

2. My child is in Good Health and has my permission to participate in The Giving Nest's daily activities. Yes _____ No _____ If no, please explain on the line below if your child cannot participate in any activity and/or if any conditions require special accommodations.
   _____

3. My child has permission to play in the sectioned off areas on the property that is outside of the fenced in playground area (with the teacher and/or the teacher assistant.) This will allow us to increase our outside play time. Yes _____ No _____

Parents signature _____   Date _____

_____

Permission Form # 2 - (Social Media)

The children at the Giving Nest participate in lots of interesting and fun activities throughout the year. We want to give you many opportunities to watch your children enjoying themselves and learning new things. With this in mind we are asking for your permission below. (No full names or personal information will be included at any time)

1. I give permission for you to put photographs of the children in our monthly newsletter
2. I give my permission to allow my child to be photographed and/or videoed for Giving Nest promotional and/or advertising purposes.
3. I give permission to allow my child to be photographed and/or videoed with his/her class that would be displayed on our Giving Nest Web Page.
4. I give permission to allow my child to be photographed and/or videotaped with his/her class for our Facebook Page.
5. I give permission to allow my child to be photographed and/or videotaped with his/her class for our Instagram Page.
6. I give permission to allow my child to be photographed and/or videotaped with his/her class to be emailed to his/her classmates and present Giving Nest families.

I_____ give permission ALL to the statements listed above.

Parent's Signature: _____Date: _____

PLEASE NOTE: If you do not give permission to ALL the statements above, please sign below and specify below.

I give permission to numbers _____ but I do not give permission to numbers _____.

Parent's Signature:_____ Date _____

Child's Name: _____   **Class Letter**_____