

Permissions, Authorizations and Release

I give permission for my child to view G PG on a limited basis during the Before and After School Program.

Parent's Initials _____

I Do Do Not give permission to have my child _____ photographed. I understand that these pictures are for use in slide shows, flyers, bulletins and special.

Parent's Initials _____

My child, may or maynot have sunscreen applied to exposed skin areas before going outside on warm sunny days. It will be provided to the child 15 minutes before going outside. The sunscreen that the program will be using is: COPPERTONE SPORT

Parent's Initials _____

I would prefer for my child to work on their homework while in afterschool care. YES _____ NO _____

Other comments on homework: _____

I understand that an up-to-date immunization record is required to participate in the Before and After School Program. I confirm that my child's immunizations are on file with the school and I further give the Before and After School staff permission to access these records.

Parent's Initials _____

Personal Release Statement: It is my understanding that there are risks of injury in any recreational or sport activity and that I/we voluntarily assume such risks. I take full responsibility for the actions and physical condition of this child. I agree to indemnify and hold harmless Denver Christian Schools and the Before and After School Program from liability, loss, cost or expenses (including attorney's fees, medical, dental and ambulance costs) that this child may incur while participating in the Before and After School Program activities.

Parent or Guardian Signature

Does your child have any allergies that we need to be aware of?

Note: If your child takes any medication, we must have an approved Medication Form filled out and on file separately for the Before & After Care Program. Please ask the program director for a copy of these forms.

Is there anything else you would like us to know about your child?
