

Minot AFB Family Child Care

Sunscreen, Bug Spray, Lip Balm, and Aloe/ Hand Lotion Transportation/Field Trip Agreement Photography/Video Release and Consent

I give my permission for my child listed below:

Child's Name: _____

1) ____ To be transported by the Family Child Care provider to participate in all fieldtrips, outings, trips to on and off-base facilities, and/or to and from school.

2) ____ To have sunscreen, bug spray, lip balm, aloe/hand lotion, diaper cream, and/or hand sanitizer applied by the Family Child Care provider (as needed) to my child for the duration of the Family Child Care contract.

3) ____ I **give /do not give** permission for my child to be photographed. I understand that any pictures may be used as a specific reference to the Family Child Care program for training, promotion, publicity, or recognition of the program.

4) ____ I **give /do not give** permission for my child to be videotaped. I understand that any videos may be used as a specific reference to the Family Child Care program for training, promotion, publicity, or recognition of the program.

5) ____ I **give/do not** give permission for my child allergy and or medical plans of action to be posted in the classroom for the caregivers to have access to at all times.

Parent/Guardian Signature

Date

Program Official Signature

Date