PERMISSION FORMS

TRAVEL/FIELD TRIP PERMISSION FORM	
I, (child's name (location), on (date),	(parent/guardian), hereby give my consent for) to visit
(location), on, with	between the hours ofand(caregiver/daycare).
I understand the children will be traveling by	
In the event of an accident, I or the emergency contact can be reached at:	act person named here,
Signature of Parent/Guardian:	Date:
DEDMICCION TO	TYCE CYTAIC CENTERY
	<u>USE SUNSCREEN</u>
I (parent/gu Academy, to apply sunscreen to areas before going outside on sunny days as directed	uardian), hereby give my consent for Mickey (child's name), to exposed skin d by the sunscreen manufacturer.
I agree to provide the caregiver/daycare with the sur more (without Paba), in its original container outlini child's name in permanent marker.	
Signature of Parent/Guardian:	Date:

I,	
Signature of Parent/Guardian: Date:	
EMERGENCY MEDIAL TREATMENT PERMISSION FORM	
I,	
transported by car or ambulance to an emergency centre for treatment, and agree to hold Mickey Academy and its employees harmless.	
Parent's Signature Date:	