



Arlington Heights Nursery School
Established 1965

Child's Name _____
Date of Birth _____

Parental Consent Form 2010 - 2011

Consent to Apply Sunscreen

- I give consent for AHNS staff to apply sunscreen to my child. I do not give consent.
- I understand that sunscreen should be applied at home in the morning before coming to AHNS, and that staff members will reapply sunscreen as necessary during the day.
- My child has no known allergies to sunscreen.

Walking Field Trip Consent

As a component of our curriculum, we take neighborhood walking field trips. Teachers take appropriate safety precautions such as carrying a mobile phone, first aid kit, and epi-pen if prescribed for a child in the group.

- I give my consent for my child to participate in walking field trips.
- I do not give consent for my child to participate in walking field trips.

Photography and Website Consent Form

I authorize AHNS to have, use, publish and reproduce photographs, slides, or videotape of my child for its records, for displays of our classroom activities, and for our public relations efforts, including brochures, marketing materials, photo boards, slideshows, and videos.

- I do authorize such use. I do not authorize such use.

I authorize AHNS to use photographs of my child on our website (children will not be identified)

- I do authorize such use. I do not authorize such use.

Consent for Classroom Observations

As part of our program, we often have consultants, specialists, therapists and college or graduate students observe in our classrooms, either to further their understanding of early childhood, or to provide feedback to us about our work with young children. This is one of the ways we learn about and implement best practices in early childhood education at AHNS.

- I grant permission for my child to be observed in his or her classroom and for our consultants to provide feedback to the teaching and administrative staff.
- I do not grant permission for my child to be observed in his or her classroom.

Parent/Guardian Signature: _____

Print Name: _____

Date: _____