

**LICENSE NUMBER 1309**

**PERTAINING DIRECTLY TO DCCCC:**

I give permission for my child to participate in walking trips, under the supervision of DCCCC staff and parents. These local explorations may be spontaneous and could include water play for children over two years of age.

My child may participate as a play partner in physical, occupational, or speech and language therapy activities with other children who receive therapy at DCCCC. The activities are play-based. Children usually look forward to the opportunity to do a special activity, but their participation is entirely voluntary. Activities may be held in the whole group or small groups in the classroom or elsewhere in the Center.

I give permission for DCCCC to apply topical ointments such as sunscreen and diaper ointment to my child.

I give permission for my child and family members to be photographed while attending DCCCC. Photos are sometimes published or displayed at the center, in newsletters, and on the DCCCC website.

I give permission for my/our phone number and address to be released to DCCCC parents and prospective families.

In the preschool program, I give permission for DCCCC to exchange routine information with the staff of my child's public school.

**PARENT/GUARDIAN ACKNOWLEDGEMENT:** I/We have received, understand, and agree to DCCCC's program permissions listed above.

\_\_\_\_\_  
*Parent/Guardian Signature*

\_\_\_\_\_  
*Date*

**ANNUAL UPDATE:** Make necessary changes & initial & date below to verify that the information is current.

Parent/Guardian Initials:	Date:	Parent/Guardian Initials:	Date:
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