



2018-2019 School Year
PERMISSION FORM

I give permission for my child/children _____ to watch a G or PG rated **movie** in the case of extreme weather or special occasion during the 2018-2019 School Year. The name and rating of the movie will be announced in ADVANCE of showing.

Parent or Guardian Signature

Date

I give permission for my child/children _____ to participate in **nail painting** activities during the 2018-2019 School Year.

Parent or Guardian Signature

Date

I give permission for my child/children _____ to have **Glitter Tattoos** applied during the 2018-2019 School Year.

Parent or Guardian Signature

Date

I give permission for the Guilford Before & After Care Program to share photos and/or videos of of my child, _____, on Facebook, in emails to families, and/or be used to display on bulletin boards within their schools during the 2018-2019 School Year.

I understand that my child/children's full names will not be used.

Parent or Guardian Signature

Date

IF THIS FORM IS NOT RETURNED YOUR CHILD WILL BE UNABLE TO PARTICIPATE IN THESE ACTIVITIES.