Discovery Kids Learning Center

150 Stahl Road, Getzville, NY 14068
Phone: 716.629.3463
Fax: 716.629.3495
discoverykidslearningcenter.com

Permission Form

Child's Name: _____ Date of Birth: _____

Please read each section below and circle your response

PHOTOGRAPHY (PHOTOS / MEDIA / VIDEOS)

YES NO

I give permission for my child to be photographed or filmed at the Discovery Kids Learning Center for use on the program's Facebook page, in slides, videos, or photo displays in conjunction with activities related to education and our center. My child's name may also be used for these purposes.

PHOTOGRAPHY (KANGAROOTIME / YEARBOOK)

YES NO

I give permission for my child to be photographed for the Kangarootime app and for his/her photo to be included in a class picture and/or yearbook. My child's name may also be used for these purposes.

FIELD TRIPS (Summer Camp Only)

YES NO

I give permission for my child to travel to and participate in field trips under the supervision of the Discovery Kids Learning Center program staff. I will be notified of each trip in advance.

OUTDOOR ACTIVITIES

YES NO

I give permission for my child to participate in neighborhood walks and outdoor activities under the supervision of the Discovery Kids Learning Center program staff.

COMPUTER USE

YES NO

I give permission for my child to use classroom tablets for educational purposes as they pertain to the Discovery Kids Learning Center program curriculum.

Parent/Guardian Signature: _____ Date: _____