

Bee Creative Playschool

NOTICE of ACTIVITIES and CONSENT – PLEASE READ CAREFULLY

The purpose of this form is to inform you about the collection and use of student information and to gain your consent for the use of this information by Bee Creative Playschool. This consent form only applies to the current school year.

I hereby give consent for the Playschool to use information/photos of my child _____
for the following purposes: (Child's Name)

- | | | |
|-----|----|--|
| Yes | No | The use of student's name, photo and comments in the Playschool newsletter and/or website |
| Yes | No | The taking or posting of individual or class photos |
| Yes | No | The use of student names and/or photos for each child's locker identification |
| Yes | No | The use of student names and/or photos on artwork displayed at the Playschool |
| Yes | No | The taking of photos and/or videos of classroom or other school activities. (The Playschool may not be able to restrict such activity at public events.) |
| Yes | No | The use of student names and/or photos in local newspapers |
| Yes | No | The use of student names and/or photos for birthday recognition purposes |
| Yes | No | The circulation of information on a "need-to-know" basis regarding students who have severe or life-threatening medical conditions |

We realize that there may be occasions when you, as parents or guardians, have concerns relating to the safety of your child and any of these uses of information. If this is the case, please submit your specific requests in writing to the teacher.

Signed: _____
(Parent or Guardian's Signature) (Date)