

## Photo and Field Trip Consent Form

CHILD'S FULL NAME \_\_\_\_\_

**Please initial next to each sentence below that you consent to:**

\_\_\_\_\_ I authorize those in charge at the Children's Center to take my child on those walking field trips that are part of the planned activities program of the school.

\_\_\_\_\_ I agree to instruct my child to cooperate with all directions and instructions of the Children's Center Staff.

\_\_\_\_\_ I agree that my child may be photographed while participating in school activities.

\_\_\_\_\_

Parent or Guardian Signature

\_\_\_\_\_

Date