



### Permissions Form

Please complete the form in entirety to grant or deny Hillcrest Academy permission to the following items. If you have any questions, please see the office staff.

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Child's Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Child's Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Parent/Guardian Name: \_\_\_\_\_ Signature: \_\_\_\_\_

I have received, read and understand Hillcrest's Picture Policy on Page 51-52 of the Parent Handbook.

I give Hillcrest permission to take individual and/or class pictures of my child.  YES  NO  
I give Hillcrest permission to use pictures that may contain my child on their web site.  YES  NO  
I give Hillcrest permission to use pictures that may contain my child on their social media pages.  YES  NO

Initial: \_\_\_\_\_ Date: \_\_\_\_\_

I have received, read and understand Hillcrest's Consent for Sunscreen and Bug Spray on Page 41 of the Parent Handbook.

I give Hillcrest permission to apply the sunscreen that I send in for my child.  YES  NO  
I give Hillcrest permission to apply the bug spray that I send in for my child.  YES  NO  
I give Hillcrest permission to apply Rocky Mountain SPF 30 sunscreen if I forget to send in sunscreen.  YES  NO

Initial: \_\_\_\_\_ Date: \_\_\_\_\_

I have received, read and understand the Diapering Policy as discussed on Page 45 of the Parent Handbook.

I give Hillcrest permission to apply diaper cream that I send in.  YES  NO  
Initial: \_\_\_\_\_ Initial: \_\_\_\_\_ Date: \_\_\_\_\_  
I give Hillcrest permission to apply Desitin if I forget to send in diaper cream.  YES  NO  
Initial: \_\_\_\_\_ Initial: \_\_\_\_\_ Date: \_\_\_\_\_

I have received, read and understand the information on potassium iodide as discussed on Page 47-49 of the Parent Handbook.

I give Hillcrest permission to administer the KI pill in the event of a nuclear emergency.  YES  NO  
Initial: \_\_\_\_\_ Initial: \_\_\_\_\_ Date: \_\_\_\_\_