**RELEASES:**

I have read and understand all the information made available to me by BCC and agree to abide by their policies; Parent Handbook, Parents' Rights, and Health Care Policy.
I give permission for my Preschooler to walk to the Sargent Memorial Library.
I give permission for my child to be video taped and photographed for the sole purpose of BCC parents and children to watch and look at.
I give permission for my child's pictures to be posted on the BCC blog/website (no names)

I release both BCC and the United Church of Christ from all responsibility and liability if my child is injured or taken ill while on premises and off site.

My child's immunization's/lead screen records and physical exam forms are on file at BCC
I give permission for BCC staff to apply NO-AD brand (spf#30/45) yes( )
no( )
I give permission for BCC staff to use anti bacterial soap and wipes yes( )
no( )
I give permission for my own brand of sunscreen:_____

**Parent Signature:_____date:_____**