***Photography***

My signature below authorizes Mini-Miracles Child Care Center to take pictures and videos of my son/daughter , and use any or all of these photographs or videos for promotional purposes. I hereby waive any right to inspect or approve the finished photograph, video, advertising copy or printed copy that may be applied, and hereby release Mini-Miracles from any and all liability, royalties or other claims associated with the use of such photographs or videos. These photographs and videos will be used for in-house student projects. Mini-Miracles may use such photographs or videos for promotional purposes.

Parent/Guardian signature Date

***Walking***

I give Mini-Miracles Child Care Center permission to take my son/daughter, , on outside walks while in their care at school. These walks may go off of school property, such as within the general facility. First Aid Kits and emergency information are *always* included on these walks, and the Director is notified of the time location of the walks. I understand that I will fill out a separate permission slip for field trips that leave the general vicinity and/or require transportation by bus or car. I will be notified of these trips well in advance.

Parent/Guardian signature Date

***Topical Ointments***

I give Mini-Miracles Child Care Center permission to use the following topical ointments for my son/daughter , if I provide them.

*Type of ointment Brand of Ointment*

 Sunscreen/Sun block

 Insect Repellant

 Body/Hand Lotion

 Diaper Cream

 Chap Stick \_

\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_