



# MADGE SEXTON KINDERGARTEN PERMISSIONS

Child's Name: \_\_\_\_\_

- I give permission for my child to be photographed/videoed within the Kindergarten as part of the general education program and with their first name.  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_
- I give permission for my child to be photographed for the yearly class photograph with full names.  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_
- I give permission for photographs of my child with first name initial to be used on the Madge Sexton Kindergarten Families Facebook page.  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_
- I give permission for photographs of my child to be used on the Madge Sexton Kindergarten website.  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_
- I give permission for my child to be photographed/videoed for the newspaper with first name only.  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_
- I give permission for other parents and visitors to photograph my child in group photos with their own Kindergarten child, for their own use. **PLEASE NOTE: Parents and visitors are NOT to publish these photos on any form of social media WITHOUT personal permission from individual parents.**  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_
- I give permission for staff to apply sunscreen on my child.  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_
- I give permission for an ambulance to be obtained for my child in case of an emergency.  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_
- I give permission for my child to participate in activities/visits/experiences (school library, etc.) at McLaren Vale Primary School with supervision from Kindergarten staff.  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_
- I give permission for my child to go on local walks (e.g. to the post box on Main Rd, to the walking track behind Kindy, to local venues (no further than McLaren Vale Visitor's Centre or McLaren Vale Post Office) with supervision from Kindergarten staff at various times throughout my child's time at Kindergarten as part of the learning program.  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_
- I give permission for a copy of my child's exit assessment to be given to the school of my choice.  
SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

## OTHER CHILD CARE PROVIDERS

(Please give information below about any other relevant childcare providers for your child.)

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## ANY OTHER COMMENTS / RELEVANT INFORMATION

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