Downtown Jewish Preschool
#1 AUTHORIZATION FORM

☐ I have read the **Back to School COVID-19 Guidelines 2020-2021**

☐ I have read and understand DJP's Parent Handbook.

☐ I have read and understand DJP's discipline policy.

☐ I authorize the faculty and staff of DJP to photograph or video my child for the purpose of social media content, website content, advertising, and other marketing purposes.

☐ I give permission for my name, telephone number and e-mail to be included in the class list that will be distributed.

☐ I give permission for childcare personnel to have access to my child's records.

☐ I give permission for my child(ren) to be taken off school premises for educational related activities or trips provided by Downtown Jewish Preschool. I understand that this may either be by foot or in a licensed insured vehicle chosen for a trip day or excursion.

☐ I allow my child to participate in food related activities such as baking and special occasions such as holiday or birthday parties wherein food is involved or provided.

☐ I give my consent to DJP to administer treatment to my child in the event of an emergency at which time I cannot be reached. I give consent to transport by ambulance if situation warrants it and be treated at the chosen hospital.

☐ I have read, completed, and returned the Swim Central Form.

☐ Parents and DJP are working cooperatively to assure that children are provided with nutritious snacks and meals. I agree to provide a nutritious lunch and a mid-afternoon snack for my child if not signed up in the DJP lunch program.

☐ I understand that DJP is NOT an allergen-free facility. This includes but is not limited to peanuts, tree nuts, gluten, wheat, and soy products.

Enrollment Date _____

_____/_____

Print Parent Name Print Child's Name

_____ _____

Signature of Parent or Guardian Today's Date