

# Learning Patch Summer Program 2011

6035 Main Ave., Orangevale, CA 95662

916-988-5590

## Field Trip Permission

I hereby request that my child, \_\_\_\_\_, be permitted to participate in field trips, to the park, or any other activities that would involve taking the child outside of the daycare for his/her benefit in attendance at this facility. I understand that I will be informed of all planned activities. I have received a Learning Patch Summer Program calendar and am aware of all the field trips my child will be attending.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### The Learning Patch Children's Center Sunscreen Permission Slip

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

I give permission for The Learning Patch to apply sunscreen to my child.

Name of Sunscreen: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### The Learning Patch Children's Center Acknowledgement of Rules and Policies

I have received a copy of the pool and classroom rules. I have discussed with my child the benefits of following the rules and the consequences if my child does not follow the rules.

Parent Signature: \_\_\_\_\_ Print: \_\_\_\_\_

Child's Signature: \_\_\_\_\_ Print \_\_\_\_\_