

**GENERAL PERMISSION SLIP**



**PHOTOGRAPHS**

I give my permission for my child, \_\_\_\_\_  
CHILD'S FULL NAME

to be photographed by any Island Montessori Academy faculty or staff. I understand that these pictures may be used on the school's website or other publicity materials.

**FIELD TRIPS AND TRANSPORTATION (please initial)**

\_\_\_\_\_ I give my consent for my child to participate in Island Montessori Academy's approved extra-curricular activities and school trips.

\_\_\_\_\_ I understand that when possible, transportation will be provided by a school bus or paid and insured carrier with advance notice.

\_\_\_\_\_ On occasions when more spontaneous trips occur, I permit my child to ride in a car with seatbelts with an IMA representative or parent volunteer.

**OTHER**

\_\_\_\_\_ I give permission to IMA faculty and staff to apply insect repellent and sunscreen to my child while my child is at school. They will use products that I have provided. If I have not provided any, they may use the school-provided products at their discretion.

\_\_\_\_\_ I give permission for my child to freely, under adult supervision, maximize the IMA facilities and grounds, including the adjacent playgrounds, parks, and gardens.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

**Please note: If there are two legal Parents or Guardians, both must sign.**