

ST. ANDREWS SCHOOL 2018-2019

PARENTAL PERMISSIONS: FORM 2

AUTHORIZATION TO DISPENSE EXTERNAL PREPARATIONS

I hereby give St. Andrews School personnel permission to apply one or more of the following topical ointments/preparations to my child _____ in accordance with the directions on the label of the container:

- baby wipes
- bandaids
- antibiotic ointment, such as Neosporin
- first aid spray, such as Bactine
- sunscreen or sun block
- insect repellent
- petroleum jelly, such as Vaseline

Except for first aid, personnel shall not dispense prescription or non-prescription medication to a child without specific, written authorization from the child's physician and/or parent. Forms are available should that type of dispensing be required.

Parental Signature _____ **Date** _____

AUTHORIZATION TO PHOTOGRAPH

____ I hereby grant St. Andrews School permission to photograph my child _____ participating in camp activities. Pictures may be posted throughout the school, on the school's website, in print and on social media.

____ I **do not** grant St. Andrews School permission to photograph my child while participating in camp activities.

Parental Signature _____ **Date** _____

AUTHORIZATION TO SHARE INFORMATION

____ I hereby grant permission for my child's name, address, email and phone number to be distributed in a class directory.

____ I **do not** grant permission for my child's name, address, email and phone number to be distributed in a class directory.

Parental Signature _____ **Date** _____

