



Medical and Photography/Media Release

_____ (student name) has my permission to participate in Northside Preschool's Mother's Day Out program. I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child. However, if neither I nor my emergency contacts can be reached, I hereby authorize Northside Preschool to secure emergency transportation for my child to the nearest hospital and to secure the medical treatment deemed necessary by Emergency Medical Service personnel. I understand that Northside Preschool does not assume any financial responsibility for medical care received by my child. I understand the teachers and staff are trained in the basics of First Aid and CPR. I authorize them to give my child first aid when appropriate.

Parent Signature: _____ Date: _____

Northside Preschool does not post pictures of our preschool children to social media. I understand that the teachers and staff will take pictures of my child throughout the year for projects such as, but not limited to: End of Year Scrapbook, slideshows, and gifts for parents. I understand that pictures and videos may be taken for parties and special days, including but not limited to Storybook Character Parade, Thanksgiving Feast, Christmas Program, Easter Egg Hunt, and Graduation/End of Year Program. I understand a private, unlisted link will be sent to preschool parents only when recordings of these programs are available. I also understand Northside Preschool is not responsible for third party postings of photos or videos from these events. If I am not comfortable with my child participating in these events, I understand that it is my responsibility to keep him/her home the day of that event.

Parent Signature: _____ Date: _____