



Lakeland
Community College

Childminders/Campus Kids

Child's Name: _____

PERMISSION FORM

I hereby grant permission for my child to use all the play equipment and participate in all of the activities of the school.

Yes No

I hereby grant permission for my child to take part in walks through the Lakeland Community College facilities and grounds under the supervision of a staff member.

Yes No

I hereby grant permission for my child to be included in Childminders/Campus Kids screenings and assessments connected with the school program.

Yes No

I hereby grant permission for my child to be included in photos, audios, video tape and/or observed by the students enrolled in Lakeland and Holden University classes to be used for educational purposes only.

Yes No

Signature of Parent/Guardian

Date