



Suite 101, 57 East Main Street, Westborough, MA 01581

(508) 366-9288

**eBridge Montessori School
Parents Permission and Acknowledge Form**

Child's Name _____ Date of Birth _____

Age _____ Date of Admission _____

Please respond to following questions, then sign your name at the end of the form.

School Directory Permission

I give permission to the staff of eBridge Montessori School to put my contact information on the school directory for parents to arrange car-pooling and play day purposes.

Yes No

Picture Taking

I give permission to the staff of eBridge Montessori School to take videos/pictures of my child while he/she is enrolled at the School. I understand that these videos/pictures will ONLY be used for the purpose of education or promoting our school. I also understand that other parents may take videos/photos or videos of the children during the special event at the school.

Yes No

Topical Cream Permission

I give permission to the staff of eBridge Montessori School to apply topical cream for my child. Topical creams are defined as diaper rash ointments, Sunblock lotion, and calamine lotion. I understand that I will provide the topical cream when needed for my child.

Yes No

Natural Walk Permission

I give permission to the staff of eBridge Montessori School to take my child to natural walk around the school.

Yes No

Field Trips

The elementary children will have opportunities to participate in class field trips to enrich their classroom experience throughout the school year. These trips are carefully arranged. Children may be transported in privately owned vehicles by staff or parent volunteer. I give the permission for my child to participate in field trips away from eBridge Montessori School.

Yes No

This permission form is valid for the entire period of my child's enrollment at eBridge Montessori School unless the parents submit a written notification to the school.

Signature of Parent/Guardian

Date

Print Name of Parent/Guardian