

CHILD'S NAME \_\_\_\_\_

YOUR PERMISSION AND INITIALS/SIGNATURE ARE REQUESTED AS FOLLOWS.



**WALKING TRIPS**

MY CHILD HAS PERMISSION TO ACCOMPANY HIS/HER CLASS, STAFF, AND COOPERATING PARENTS ON WALKING TRIPS TO AREAS OF INTEREST NEAR THE SCHOOL.

\_\_\_\_\_  
SIGNATURE DATE

**SCHOOL DIRECTORY**

\_\_\_ YES, YOU MAY LIST OUR FAMILY'S NAMES, ADDRESS, TELEPHONE NUMBER AND EMAIL ADDRESS IN THE SCHOOL DIRECTORY, FOR DISTRIBUTION TO SCHOOL PARENTS, FOR SCHOOL PURPOSES ONLY.

\_\_\_ No, I DO NOT GIVE PERMISSION

**PHOTOGRAPHY**

\_\_\_ YES, I GIVE THE PRESCHOOL PERMISSION TO USE MY CHILD'S PICTURE (NAME WILL NEVER BE USED) ON THE PRESCHOOL OR CHURCH WEBSITE, PRINTED MATERIALS OR ANY OTHER PUBLIC MEDIA.

\_\_\_ No, I DO NOT GIVE PERMISSION.

\_\_\_\_\_  
INITIALS DATE INITIALS DATE

**CHILD PROTECTION POLICY**

IN KEEPING WITH THE PCOL (CHURCH'S) CHILD PROTECTION POLICY, WE REQUEST THE FOLLOWING INFORMATION:

PARENT #1 \_\_\_\_\_  
HOW LONG HAVE YOU LIVED IN THIS COMMUNITY?

PARENT #2 \_\_\_\_\_  
HOW LONG HAVE YOU LIVED IN THIS COMMUNITY?

\_\_\_\_\_  
WHERE ELSE HAVE YOU LIVED IN THE PAST 10 YEARS?

\_\_\_\_\_  
WHERE ELSE HAVE YOU LIVED IN THE PAST 10 YEARS?

\_\_\_\_\_  
HAVE YOU EVER BEEN CONVICTED OF A FELONY? Y / N  
IF SO, EXPLAIN THE NATURE, DATE, AND LOCATION.

\_\_\_\_\_  
HAVE YOU EVER BEEN CONVICTED OF A FELONY? Y / N  
IF SO, EXPLAIN THE NATURE, DATE, AND LOCATION.

\_\_\_\_\_  
PLEASE LIST TWO PERSONAL REFERENCES WITH AN ADDRESS AND PHONE NUMBER.

\_\_\_\_\_  
PLEASE LIST TWO PERSONAL REFERENCES WITH ADDRESS AND PHONE NUMBER.

1) \_\_\_\_\_

1) \_\_\_\_\_

2) \_\_\_\_\_

2) \_\_\_\_\_

I GIVE PERMISSION FOR LPP TO SUBMIT MY NAME AND ANY OTHER NECESSARY INFORMATION TO A MEGAN'S LAW BACKGROUND CHECK FOR CHILD ABUSE CONVICTION INFORMATION.

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\_\_\_\_\_  
PARENT #1 SIGNATURE DATE

\_\_\_\_\_  
PARENT #2 SIGNATURE DATE

PLEASE PROVIDE EACH REFERENCE WITH THE LPP CHARACTER REFERENCE FORM AND REQUEST THAT THEY RETURN THE SIGNED FORM TO THE LPP DIRECTOR'S OFFICE.