



BEN SAMUELS
CHILDREN'S CENTER
MONTCLAIR STATE UNIVERSITY

PERMISSION FORM

Child's Name: _____

I give permission for my child to participate in Center sponsored activities and events. I understand that I will be notified, in advance, of any trips or activities which will take place off-campus.

YES NO (please circle one)

I give permission for my child to be photographed during the time s/he is participating in the Center program. I am aware that the photographs will be randomly posted onto the classroom blogs throughout the year.

YES NO (please circle one)

I give permission for my child to be videotaped or photographed during the time s(he) is participating in the Center program. The permission is based on the assumption that there will be no commercial use of the photographs without further written consent.

YES NO (please circle one)

The Children's Center serves the Montclair State University College of Education and other university divisions as a laboratory for the preparation of educational personnel. The Center and the College also engage in educational research, curriculum development and preparing/distributing materials.

As a result of this commitment, children will at times participate, as groups or individually, with MSU students in experiences related to the student's class preparation and assignments. These experiences will be carried out under the direct supervision of the Center personnel, and will occur inside the Center classroom, gym, or outdoors. For all experiences carried out without direct supervision of the Center staff, specific parental permission will be requested on an individual basis.

I understand the intent of this release, and my permission is given in consideration of the educational purposes it may share.

(Parent's Signature)

(Date)