



Guilford Center for Children, Inc.

2025-2026 SCHOOL YEAR PERMISSION FORM

I give permission for my child/children _____
to watch a G or PG rated **movie** in the case of extreme weather or special occasion during the
2025-2026 School Year.

Parent or Guardian Signature

Date

I give permission for my child/children _____
to participate in **nail painting** activities during the 2025-2026 School Year.

Parent or Guardian Signature

Date

I give permission for my child/children _____
to have **Glitter Tattoos** applied during the 2025-2026 School Year.

Parent or Guardian Signature

Date

I give permission for the Guilford Before & After Care Program to share photos and/or videos of
of my child, _____, on Social Media, in emails to families, and/or be
used to display on bulletin boards during the 2025-2026 School Year. I understand that my
child/children's full names will not be used.

Parent or Guardian Signature

Date

**IF THIS FORM IS NOT RETURNED YOUR CHILD WILL BE UNABLE TO
PARTICIPATE IN THESE ACTIVITIES.**