



Child's Name_____

Activity Authorization	united met
Kindergarten and/or Broomfield UMC Summer	ate in all activities provided by Apple Tree Christian Preschool and Camps. I understand that my child will be participating in activities omfield United Methodist Church Campus. Please list any restrictions.
Signature	date
Permission to Apply Sunscreen	
Summer Camps to apply sunscreen as needed t	le Tree Christian Preschool and Kindergarten and/or Broomfield UMC hat is provided by the school. I agree to apply sunscreen to my child the morning. (Please see parent handbook for specific brand of sunscreer
Signature	date
Media Presentation	
	nedia presentations while at Apple Tree Christian Preschool and Camps. I understand that all viewed material will be G rated and that I
Signature	date
Class Roster	
	o be published on a class roster for the purpose of networking with othe ilies of Apple Tree Christian Preschool and Kindergarten and/or
Signature	date
Field Trips	

I understand that field trips are an integral part of the curriculum. I further understand that my child is to be secured in a seat belt or child safety device while being transported in a car, church van, or church bus on a field trip. With this understanding, I hereby give permission for the staff and volunteers of the Apple Tree Christian Preschool and Kindergarten and/or Broomfield UMC Summer Camps to take my child on field trips in vehicles or on foot while he/she is in the program. Before each field trip, I understand that I will need to sign a permission slip specifically for that trip and that I may need to provide a car seat or booster seat for my child on field trip day.

Signature	date

Emergency Transportation Authorization

authorize Apple tree Christian Preschool and Kindergarten and/or Broomfield UMC Summer Camps to arrange
transportation in case of accident or acute illness and to arrange for possible emergency medical and/or surgical care a
(1) the closest hospital in case of dire emergency or (2) the hospital of the parent's choice. It is understood that
conscientious effort must be made to notify me, or the persons listed as emergency contacts before such action is taken,
but if it is impossible to locate me or the emergency contacts, the uninsured expense of this service will be accepted by
me.

Signature	date	
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Promotion Authorization

I hereby give my permission to Apple Tree Christian Preschool and Kindergarten and/or Broomfield UMC to photograph or record my child for purposes of promoting the services of both organizations. I understand that these images or videos may be used in print or on the internet. I understand that it is my responsibility to update this statement in the event that I no longer wish to authorize the use of my child(s) image. I agree that this authorization will remain in effect during the term of my child's enrollment. I understand that there will be no payment to me or my child if my child's image is used.

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Participant Waiver of Liability and Hold Harmless Agreement

I acknowledge the contagious nature of the Coronavirus/Covid-19. I further acknowledge that Apple Tre Christian Preschool and Kindergarten and Broomfield United Methodist church has put in place preventive measures to reduce or prevent the spread of Covid-19. I further acknowledge that Apple Tree Christian Preschool and Kindergarten and Broomfield United Methodist church cannot guarantee that my child will not be exposed to the Coronavirus/Covid-19. I am a parent or legal guardian of the child(ren) named below. As such, and in consideration for childcare or church educational activities (Activities) to be provided by Apple Tree Christian Preschool and Kindergarten and Broomfield United Methodist Church (Releasees). I, for myself and for each om my minor child(ren), fully assume all risks associated with participation in the Activities, including the possibility of contracting Coronavirus/Covid-19 by community spread or otherwise.

It is my express intent that the Hold Harmless Agreement shall be deemed as a release, waiver, discharge, and covenant not to sue Apple Tree Christian Preschool and Kindergarten, Broomfield United Methodist Church, the Mountain Sky Conference of the United Methodist Church, or the worldwide denomination of the United Methodist church including, but not limited to, its Board of Directors, agents, employees, representatives, and volunteers. I acknowledge that this waiver will remain in effect until such time that it is revoked in writing or at the signing of an updated waiver provided by Apple

Tree Christian Preschool and Kindergarten or Broomfield United Methodist Church. Agreement, I acknowledge that I have fully informed myself of the content by reading it before I sign it. I have full authority to sign this Agreement on behalf of my child(ren).

Signature	date
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Tree Christian Preschool and Kindergarten.		
Signature	date	
Preferred Physician	phone	
Address		
Preferred Hospital	phone	
Address		
Preferred Dentist	nhone	
Treferred Definist	pnone	
Address		
Parent Employer	phone	
Address		
Parent Employer	phone	
Address		

I acknowledge that I have received and read the Parent Handbook and understand the policies and procedures of Apple

Parent Handbook