Media Consent Form

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| Child's Information | |
| Name | Date of Birth |
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| Permission Statement |
| 1. I give my permission for my child to participate in media related learning activities and experiences while at Imagination Station Preschool. This includes but is not limited to television viewing and computer learning activities.  Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  2. I Do NOT give my permission for my child to participate in media related learning activities and experiences while at Imagination Station Preschool. This includes but is not limited to television viewing and computer learning activities.  Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |