

wBees Forest School

Emergency Release Form: 2023-2024 Name of Child: In an urgent situation, every effort will be made to contact the parent(s) and family physician IMMEDIATELY. **Emergency Release** I give my permission for the school to administer first-aid to my child as needed. If no one can be reached promptly, I hereby give authority to the school to obtain necessary emergency medical treatment for my child with the understanding that the family will be notified as soon as possible. I give permission for the school to release medical information to school staff and medical personnel when appropriate. **Emergency Contacts** If my child is ill and you are unable to contact me, I give the school permission to call the following people. They may take my child to their home or to the doctor. Relationship _____ Phone #_____ 1) Name Phone # 2) Name Relationship **Doctor Information** Doctor's Name: ______ Phone: _____ Doctor's Address: **Insurance Information** Name of Policy Holder: _____ Policy Number _____ Child's Social Security Number _____ Date _____ Parent's Signature:_____



Authorized Escorts: 2023-2024

Name of Child:

Cell Phone
eeded.

20 St. John's Road, Ridgewood NY 11385 wbeesforestschool@gmail.com

Parent's Signature ______ Date_____



Sunscreen and Bug Spray Form 2023-2024

I agree to have wBees Forest School apply organic sunscreen and bug spray to	
my child,	, as needed.
Student Name:	
Parent Signature:	
Date:	



Photo Release Form 2023-2024

At wBees Forest School we take photographs of children for a variety of purposes. We kindly ask you to give us permission to take and use photographs of your child in connection to her/his work in the classroom, outdoor time, and other school related activities, for use in our blog, social media (Instagram, Facebook, wBees website), student portfolios, and for internal communication within families and teachers.

I have read and understand the above. Please make your selection below:
I DO grant permission for my child to be photographed
I DO grant permission for my child to be photographed for internal uses only (Brightwheel, newsletters, class activities)
I DO NOT grant permission for my child to be photographed
Signature
Printed Name
Child's Name
Date
20 St. John's Road, Ridgewood NY 11385

wbeesforestschool@gmail.com



Walking Field Trip Permission Form 2023-2024

Dear Caregivers,

Thank you!

At wBees Forest School, we subscribe to the tenet that "there is no such thing as bad weather, only bad clothing." To this end, we will be walking to our outdoor classroom at Rosemary's Playground and Grover Cleveland Park on a regular basis. Kindly sign the permission form below indicating your permission for your child to go on these walking trips with us.

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wBees Forest School
I give permission for my child to accompany his/her class on walking field trips to Rosemary's Playground and Grover Cleveland Park, planned and supervised by wBees Forest School for the 2023/2024 school year. Staff will ensure a safe walking route and supervision to/from the school. I understand that no such field trip will take place without a safe ratio of adults to children.
Student Name:
Caregiver Signature:
Date: