Little Hands & Feet Day Care 1270 BAYRIGE PARKWAY, BROOKLYN, NY 11228 PHONE: 718 680 5437; FAX: 718 680 2757

GENERAL PERMISSION SLIP

Child's Name:	
l, permis	, Parent/Guardian hereby give ssion for my childcare providers to :
	Take photographs of my child; Give my child an occasional sweet treat, such as candy, ice cream, etc;. Assist my child with any toilet training procedures/problems; and Give my telephone number and address to other parents, as requested.
This pe	ermission slip is good from the date signed through the length of my child's enrollment.

Parent/Legal Guardian:_____

_Date:_____