Prescribed Diet

Child's	Name		
Does your child have prescribed diet?		□ _{Yes}	□ _{No}
If yes, please provide the detail of your child's prescribed diet:			
Parent	Signature		Date
Photography Release			
Harmony Kids Learning Center uses a website, social media, and a parent communication app to make our daily activities more interesting. This use of social media, our web page and our communication app may require photos of children. Names will not be included with any photos.			
		by give Harmony Kids Learning Center permission to take my child's photo ming, communication, social media, or web page purposes.	
	□ I do not give Harmony Kids learning Center permission to take my child's photo for learning, communication, social media, or web page purposes.		
Child's Name			

Parent Signature _____ Date



When photos are sent home via ProCare, you <u>are</u> allowed to share those photos on your personal social media accounts. However if there are other children in the photos that are not your own, their identities **MUST** be obscured using either blurring or emoji's to cover their faces to respect the safety and security of all of our families! Thank you!

