

Feather River College – Child Development Center

Permission Form

Please initial the following if you agree:

HEALTH

Vision screening _____

Hearing screening _____

Sunscreen _____

Barefoot indoor _____ Barefoot outdoor yard _____

Campus walks _____

SOCIAL MEDIA

Photos in newspaper, CDC newsletter, student portfolios,
FRC events. Photos will not be shared otherwise _____

Photos on FACEBOOK (closed group page) _____

Videos used solely for educational purposes _____

Signature

Date