



Playground Consent

Noah's Ark Preschool | 6455 E Ave. NW | Cedar Rapids, Iowa 52405
Ph. 319-396-3125 | office@noahsarkcr.org | Fax 319-390-4728

I give permission to Noah's Ark Preschool to take my child out to play on the school's playground.

Child's name _____ Date of Birth _____

Parent/Guardian Signature _____ Date _____

Photography Consent

I give permission to Noah's Ark Preschool to use photos **ONLY** of my child on the church's website and our Facebook. I understand that they will **NOT** use my child's name, only the photo.

Child's name _____

Parent/Guardian Signature _____ Date _____