

Face Painting Permission Form

As a parent/guardian of _____, I am giving my permission to face painting activity for Luca's Rainbow Bilingual Preschool. My child does not have any known skin allergies nor have any history of allergic reactions to any face painting products. I understand that by signing this form, I give my permission to Luca's Rainbow Bilingual Preschool to face-paint my child with commercially sold face paints products and Luca's Rainbow Bilingual Preschool is NOT responsible for any skin reactions caused by this activity.

Please provide the following information & Sign

Student's Name:

Parent/Guardian's Name:

Parent/Guardian's Signature:

Date Signed:

Parent/Guardian's Contact Phone #:
