



# Hygiene Release Form



In our classroom, we will work on hygiene to increase each child's self-help skills. These activities are a great way to work on becoming independent at taking care of oneself. These activities can occur daily, weekly, or monthly, depending on each student's needs.

It may involve your child:

- \* Brushing teeth
- \* Putting on lotion
- \* Washing face
- \* Putting on deodorant
- \* Combing hair
- \* Clipping fingernails

I will be purchasing the materials for this unit. Please sign to give your child permission to participate. If you have any concerns or questions about this unit, please feel free to contact me using the information provided on the welcome letter.

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\_\_\_\_\_ I give my child permission to participate in hygiene skills.

\_\_\_\_\_ I DO NOT give my child permission to participate in hygiene skills.

Child's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Thank you,

Mrs. Stacy McHugh

