

SAMPLE PERMISSION NOTE

Dear Parent(s) or Legal Guardian:

The Maryland Children's Oral Health Institute and _____ will introduce the ***Lessons In A Lunch Box: Healthy Teeth Essentials & Facts About Snacks***[®] program to the _____ Elementary School. Your child's school has been selected to participate in the oral health education initiative. Lessons In A Lunch Box: Healthy Teeth Essentials & Facts About Snacks is an oral health education program designed to empower children about the importance of proper flossing and brushing, good dietary choices, the dangers of cigarette smoking, the potential risks associated with oral piercing and more. A complete description of the program is outlined on the opposite side of this letter.

We would like your permission to give your child this educational lunch box including, a toothbrush, toothpaste and dental floss, inside of a plastic, carrot-shaped carrying case. The lunch box will also include a two minute sand timer. It will be important for us to provide a dental screening for your child to help us evaluate the effectiveness of the program. However, it may not be necessary to examine everyone. The Maryland Children's Oral Health Institute hosted a media reception/press conference to inform the public and the press about the initiative in 2008. We appreciate your consent to allow photographs and videotapes to be taken of your child during the presentation of the program, distribution of the lunch boxes and dental screenings.

Please complete and sign the bottom portion of this form and have your child return it to their teacher. Your child will *not* receive a lunch box without your signature on this form.

Thank you for giving The Maryland Children's Oral Health Institute and _____ opportunity to share the "*Lessons In A Lunch Box: Healthy Teeth Essentials & Facts About Snacks*" program with you and your child.

Please print clearly, sign and date. Be certain to fill in all of the lines below and check one box. This entire form must be returned to your child's teacher.

Lessons In A Lunch Box: Healthy Teeth Essentials & Facts About Snacks[®]

PERMISSION NOTE

Name of Child _____ Grade ____ Name of Teacher _____

Name of School _____ School No. _____

Name of Parent or Legal Guardian _____

- Yes**, you, _____ and have permission to give my child the lunch box that includes, a toothbrush, toothpaste and dental floss inside of the plastic, carrot-shaped carrying case and sand timer. You also have my permission to provide my child with a dental screening and take photographs. I further grant the right without fee, to make and use photographs and or videotape recordings of my child in connection with the Lessons In A Lunch Box program. I will supervise the proper use of the lunch box and the contents. *I will not hold The Maryland Children's Oral Health Institute, corporate sponsors, organizations or any person(s) affiliated with the Lessons In A Lunch Box program liable in any way for injuries that are accidental result of misuse or otherwise.*
- No**, you *do not* have permission to give my child a lunch box or any of the contents, provide a dental screening or take photographs.

Signature of Parent or Legal Guardian _____ Date _____