



5129 Dempster Street, Skokie, IL 60077  
www.CreativePathsLearningCenter.com  
Email: CreativePathsLC@yahoo.com

**PARENT CONSENT FOR PROGRAM PARTICIPATION**  
**(Please attach a copy of child's Birth Certificate)**

Name of Child: \_\_\_\_\_ Sex: Male / Female

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

I give consent for my child to participate in any and all screenings for programs provided by Creative Paths Learning Center Inc. This includes access to the online documentation and assessment components of Creative Curriculum/Teaching Strategies. I give consent for teachers to take pictures of my child for assessment and documentation purposes.

I hereby give permission for pictures/videos to be taken of my child, unless requested otherwise. These pictures/videos will be incorporated into family events, and may be used for advertising purposes.

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Apt #: \_\_\_\_\_

City: \_\_\_\_\_, Illinois Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Child's Public Assistance Number, if applicable: \_\_\_\_\_

**Children born in Cook County may order a birth certificate at:**

[www.cookctyclerk.com/sub/birth\\_certificates.asp](http://www.cookctyclerk.com/sub/birth_certificates.asp)

**Children born outside Cook County may order a birth certificate at:**

[www.vitalchek.com](http://www.vitalchek.com)