



Mask and Sanitizer Usage Form

I, _____, give permission for my child,
_____ to use the following while at Early
Childhood School of Georgetown:

_____ hand sanitizer under adult supervision (ECSG provides hand sanitizer stations)

_____ mask- we will encourage the use of a mask by your child (please send in,
ages 2 and over)

Parent/Guardian Signature: _____ Date: _____