

Joseph A. Ladapo, MD, PhD State Surgeon General

Date

Vision: To be the Healthiest State in the Nation

Dear Yulee Elementary School Staff

| Please allow my child | <u>,</u> to Participate in the 2021- |
|--|---|
| 2022 school years Pick-Up Program for the Nassau County Dental Clinic. | <u>This standing permission letter</u> |
| <u>will be valid for this school year only.</u> | |

Dental staff, located at the Full-Service School, will walk my child to and from school for their dental appointments.

Thank you for your cooperation in helping my child's dental treatment to be more accessible and more convenient.

Sincerely,

Parent/Guardian Signature

86207 Felmor Road • Yulee, FL 32097 Phone: (904) 875-6090 • http://www.nassaucountyhealth.org

PLEASE PRINT THE FOLLOWING:

| Childs Name: | | | _ |
|-----------------------|---|---------------------|------------------------------|
| Teacher: | | | _ |
| Grade | | | |
| School Lunch Time: | | | |
| Parents Name(s): | | | |
| Childs Birthday: | | | |
| Address: | | | |
| | | | |
| | | | |
| Contact Phone Number: | | _ Alternate Number: | |
| Nassau Count Yulee | partment of Health ty Health Department Dental Clinic | | Accredited Health Department |