Southern New Hampshire Services, Inc.   
Child Development Program



Authorization to Send Text Messages

By signing this form, I authorize Southern New Hampshire Services, Inc. - Child Development Program to send text messages to my cell phone to convey program information regarding center events, school closing/delays, safety alerts, attendance, and other information pertaining to the program/site in which my child is enrolled.   
  
I understand that standard text messaging rates may apply to any messages received from Southern New Hampshire Services, Inc. I also understand that I may revoke permission by submitting a new consent form to my center’s office or family worker. I agree not to hold Southern New Hampshire Service, Inc. or its employees liable for any electronic messaging charges or fees generated by this service. I further agree that in the event my cell phone number or cell provider changes I will inform SNHS, Child Development Program in writing with a new authorization.   
  
Please Print  
Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
 Parent/ Guardian’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Center: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Classroom: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I decline and DO NOT want to receive text messages. (Skip to sign and date)  
  
 I accept and DO want to receive text messages. (Fill out information below, sign and date)

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
 Cell Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
 Service Provider: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 (Example: AT&T, Verizon, T-Mobile, etc.)

This permission form will remain in effect for the program year(s) that my child is enrolled at SNHS, Child Development Program or until revoked in writing by me.

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Parent/Guardian Signature Date

Privacy Disclaimer: This text message program is provided as a service to families to give important information in a timely manner. We will not send you text messages without your consent. Text messages are not confidential – anyone who uses your cell phone or who has access to it might see the text messages. Communication services providers used by you or SNHS may also be able to see the messages.