



## Dental Hygiene Parental Permission Form

I \_\_\_\_\_, give permission for

Liz Shuttleworth to [clean my child's teeth] or [support my child in brushing their teeth] - delete as required

everyday after each meal.

I will provide a suitable toothbrush and toothpaste, along with a small plastic beaker, with their name on it, for rinsing.

I will replace the toothbrush on a regular basis and the toothpaste when it runs out.

Parent's signature

Date

I have read and understood the details of this policy

Signed

Date

Please note

As a part of my continued professional practise this document will be reviewed and amended as appropriate. You will be notified of any changes and will be required to re-sign this document.