

Permission to Photograph

I,

(parent's or guardian's name)

give permission for

(name of child care provider or facility)

to photograph my child,

(child's name)

for the following purposes:

Type of Use:	(Please check one)	
	Grant Permission	Decline Permission
Photographs:		
Display in provider's personal scrapbook		
Give photographs to current clients		
Display in facility's scrapbook or bulletin boards, shown to current and prospective clients		
Display photos on facility website or social media		
Use photos in promotional materials		
Videos:		
Give video to current parents		
Display video on facility website or social media		
Use videos in promotional materials		
Other (please list):		

* only first names and possibly last initials (in the event of two or more children with the same first name) will be displayed on the facility website.

I understand that it is my responsibility to update this form in the event that I no longer wish to authorize one or more of the above uses. I agree that this form will remain in effect during the term of my child's enrollment.

Signed:

(parent or guardian signature, and date)