SAMPLE

Photography Consent Form

Dear Parent/Guardian		
As the parent of a child/children at	_, I agree to the following:	
I understand that my child(ren) whose name(s) are listed below may be photographed at		
during normal daycare hours, field trips, or activities. I		
understand that these photographs may be used in promoting child care services, either in print or on the Internet.		
Parent/Guardian Name	Relationship To Child	
Child 1Name	<u> </u>	
Child 2 Name		
Child 3 Name		
Address		
City	State	Zip
I give permission for my child(ren) to be photographed, or their images recorded for print or electronic use in promoting our child care services. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I agree that this form will remain in effect during the term of my child's enrollment. I understand that there will be no payment for me or my child's participation.		
Parent/Guardian Signature		Date