

# Permission to Photograph

I, \_\_\_\_\_ give permission for Kathy Shilling to photograph  
(parent's or guardian's name)

my child, \_\_\_\_\_ for the following purposes:  
(child's name)

<b>Type of Use:</b>	<b>(Please check one)</b>	
	<b>Grant Permission</b>	<b>Decline Permission</b>
<b>Still Photographs:</b>		
Display in my personal scrapbook		
Give photographs possibly containing your child to current clients		
Display in facility's scrapbook or bulletin boards, shown to current and prospective clients		
Display still photos on my daycare website *		
<b>Videos:</b>		
Give video to current parents		
<b>Other (please list):</b>		

\* 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)