## AROUND THE CLOCK CHILDCARE INC

## PHOTO RELEASE FORM

## PERMISSION TO USE EMPLOYEE PHOTOGRAPH

## EMPLOYEE PHOTO RELEASE WAIVER

Employee Name:

ATC Location:

- [] Lakewood
- [] Midland
- [] Tacoma
- [] Fife
- [] All centers

I grant Around the Clock Childcare INC permission to take and use photographs/videos of me during my shifts at Around the Clock Childcare INC. I understand these may be shared online, including on Bright-wheel, Facebook, and in marketing materials. I waive any rights to inspect or approve the images/videos and release [Your Organization Name] from any claims or compensation related to their use.

Printed Name

Signature

Date Signed:

I, the undersigned, have read and fully understood the terms and conditions of signing this photo release waiver.