

*******Learning and Growing Child Care Center Photograph/Video Release Form *******

I hereby grant my permission for photographs of my Childs activities in childcare to be taken. I understand that they, may be used in such things as training teachers, bulletin boards, website, social media and more.

I agree that my child can be photographed and/ or videotaped here at the center.

Childs Name: _____

Parent or Guardian: _____

Address: _____

Day Phone # _____

Evening Phone # _____

Signature and Date: _____