



Photo Release Form

I understand that might child((ren), whose name(s) Our list below may be photographed at the Enrichment Christian Academy during normal daycare hours, field trips or activities. I understand that these photographs may be used in promoting childcare services, either in print or on the Internet.

The child(ren) are known as: _____

I _____ parent of a child/Children Enrichment Christian Academy, agree to the following.

I _____ parent of a child/Children Enrichment Christian Academy, disagree to the following.

With my signature below I Grant/disagree to give permission for my child(ren) to be photographed or their images recorded for print or electronic use in promoting the daycare services. I understand that that is my responsibility to update this form if 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 in this release.

Parent/Guardian Signature: _____ Date: _____

Relationship to the Child: _____