

## PERMISSION TO PHOTOGRAPH

I, \_\_\_\_\_\_ give permission for École Maison Enrichment Center to photograph my child, \_\_\_\_\_\_, for the following purposes:

TYPE OF USE:	GRANT PERMISSION	DECLINE PERMISSION
STILL PHOTOGRAPHS:		
Display in provider's personal scrapbook		
Give photographs to current clients		
Display in facility's scrapbook or bulletin boards		
Display still photos on facility's website/ social media site*		
Use still photos in promotional materials		
VIDEOS:		
Give video to current parents		
Display video on facility website/social media site*		
Use videos in promotional materials		
OTHER:		

\*Only first names and possibly last initials 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: \_\_\_\_\_ Date: \_\_\_\_\_