## Permission to Photograph/Record

Child's Name	Date of Birth
my child to be photographed or recorded	parent/guardian of the above listed child, hereby give my permission for I with the understanding that these images may/will appear on the ulletin boards, and social media pages. My child's image may also be used ications.
-	l use wisdom and discretion in the posting of these images and wish to do or child's name on any media without additional written permission being
Parent/Guardian's Signature	Date
Witness Signature	Date
l do not wish for my child to be photograp	phed or recorded in any fashion for any reason.
Parent/Guardian's Signature	Date