

PERMISSION TO PHOTOGRAPH/VIDEO

I give permission for my child to be photographed in scheduled preschool activities.
Such photographs may be used by the Co-op for publicity or educational purpose.

	Permission Granted	Permission Declined
Use and share in the classroom and co-op newsletter		
Use for co-op and college promotion including websites – children will not be named		
Use for educational purposes – children's last names will not be used		

Print Name _____ Date _____

Parent or Guardian's Signature _____