



Permission to Photograph

I, _____, give permission for **Seedlings Academy** to
Parent or Guardian name
 photograph/video my child, _____, for the following purposes:
Child's name

Type of Use:	(Please check one)	
	Grant Permission	Decline Permission
Still Photographs:		
Use on marketing material	<input type="checkbox"/>	<input type="checkbox"/>
Display on bulletin boards	<input type="checkbox"/>	<input type="checkbox"/>
On the Seedlings Academy website	<input type="checkbox"/>	<input type="checkbox"/>
On the Seedlings Academy Facebook page	<input type="checkbox"/>	<input type="checkbox"/>
Other: Early Learning Coalition Display	<input type="checkbox"/>	<input type="checkbox"/>
Videos:		
YouTube™ promotional video	<input type="checkbox"/>	<input type="checkbox"/>
On the Seedlings Academy website	<input type="checkbox"/>	<input type="checkbox"/>
On the Seedlings Academy Facebook page	<input type="checkbox"/>	<input type="checkbox"/>
Other (please list):		
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

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. Only first names **will** be used on the Seedlings Academy Facebook page and/or website.

Signed:

Parent or Guardian signature

Date