



## Permission to Photograph

I, \_\_\_\_\_, give permission for Worry-Free Daycare to  
(Parent or Guardian name)  
 photograph my child, \_\_\_\_\_, for the following purposes:  
(Child's name)

| Type of Use:   | (Please check one)       |                          |
|--|--------------------------|--------------------------|
|  | Grant Permission         | Decline Permission       |
| <b>Still Photographs:</b>  |                          |                          |
| Display in my personal scrapbook   | <input type="checkbox"/> | <input type="checkbox"/> |
| Give photographs possibly containing your child to current clients                           | <input type="checkbox"/> | <input type="checkbox"/> |
| Display in facility's scrapbook or bulletin boards, shown to current and prospective clients | <input type="checkbox"/> | <input type="checkbox"/> |
| Display still photos on child care website   | <input type="checkbox"/> | <input type="checkbox"/> |
| Post photos on child care's Facebook page  | <input type="checkbox"/> | <input type="checkbox"/> |
| Other:   | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Videos:</b>   |                          |                          |
| Give video to current parents  | <input type="checkbox"/> | <input type="checkbox"/> |
| YouTube™ promotional video   | <input type="checkbox"/> | x                        |
| Assessment   | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Other (please list):</b>  |                          |                          |
|  | <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.

Signed:

\_\_\_\_\_  
(Parent or Guardian signature)

\_\_\_\_\_  
(Date)