Daycare Photo Release Form

Watch Me Grow Early Learning Centre

I, _____, the parent of a child/children at Watch Me Grow Early Learning Centre (hereinafter known as the “Daycare”), agree to the following:

I understand that my child(ren) whose name(s) are listed below may be photographed at the Daycare during normal daycare hours, field trips, or activities. I understand that these photographs may be used in promoting child care services, either in print or on the internet.

The child(ren) are known as:

_____

_____

_____

With my signature below, I grant permission for my child(ren) to be photographed, or their images recorded, for print or electronic use in promoting the Daycare's services. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I agree that this form will remain in effect during the term of my child's enrollment. I understand that there will be no payment for me or my child's participation in this release.

Parent/Guardian Signature: _____

Date: _____

Relationship to Child: _____