

PHOTO RELEASE

l,	, the parent of a child/children at Bright Start Learning Center
agree to the following:	
l,	, the parent of a child/children at Bright Start Learning Center do
not give consent to the following	j:
I understand that my child whos	e name is listed below may be photographed at the Daycare
during normal daycare hours, fie	eld trips, or activities. I understand that these photographs may
be used in promoting childcare	services, either in print or on the Internet.
The child is known as:	
With my signature below I grant	/deny permission for my child to be photographed, or their
images recorded for print or elec	ctronic use in promoting the Daycare's services. I understand
that it is my responsibility to upd	late this form annually or when/if my preference changes. I
agree that this form will remain i	in effect for one year. I understand that there will be no payment
for me or my child's participatior	n in this release.
Parent/Guardian Signature	Date
Relationship To Child	

