

_____, give permission for Hooper Academy ELC to

photograph my child,	, for the following purposes:
Type of Use:	(Please check one) Grant Permission Decline Permission
Still Photographs:	
Display in my personal scrapbook	
Hang photographs in our room.	
Display in facility's scrapbook or bulletin	
boards, shown to current and prospective clients	
Display still photos on Hooper ELC's website*	
Post photos on Hooper ELC's Facebook	
page	
Other:	
Videos:	
Give video to current parents	
Other:	
Other (please list):	
*Only first names and possibly last initials same first name) will be displayed on the	s (in the event of two or more children with the facility website.
I understand that it is my responsibility to wish to authorize one or more of the abo effect during the term of my child's enrolln	update this form in the event that I no longer ove uses. I agree that this form will remain in nent.
Signed:	
(Parent or Guardian signature)	(Date)