

Vernon Child Development Center

Photo/ Video Release Form

As the parent/ guardian of a child at Vernon Child Development Center, I agree to the following:

- I understand that my child may be photographed/ recorded at Vernon Child Development Center during regular center hours, field trips, or other outside activities.
- I Understand that these photos/ videos may be posted throughout my child's classroom and throughout the center.
- I understand that the first names may be added to photographs or videos. Last names will not be used for any reason, unless special permission is granted.
- I give permission for my child's photograph/video to be used in the following (check all that apply):
 - All Center Newsletters
 - Vernon Child Development Center Website
 - Vernon Child Development Center Facebook Page
 - Brightwheel Application (by checking this box, I understand that my child may be present in a photo shared with another family)
 - All Promotional Materials (including but not limited to: newspaper ads or articles, brochures, posters)

____ Yes, my child may be photographed/ recorded for all the purposes stated and checked above.

____ No, my child may not be photographed/ recorded for any reason.

Child's Name: _____

Parent/ Guardian Signature: _____

Date: _____