



PHOTO RELEASE FORM

Please read through this form and fill out accordingly.

NAME OF GUARDIAN:

NAME OF CHILD:

I am allowing Ms. P's Daycare to use photos of my child for the schools publications on social media and in the press.

I am not allowing Ms. P's Daycare to use photos of my child for the schools publications on social media and in the press.

By signing this form, I acknowledge the terms and conditions of Ms. P's Daycare.

CONTACT DETAILS

PARENT/GUARDIAN

MOBILE

E-MAIL

ADDRESS

Signature of parent/guardian

Ms.P's Daycare
(202) 408-5494