

## Photo/Video Release Form

Child's Name:	
Site/Classroom:	Program Year:
to identify a child's cubby, and up on the walls a hang photos at the Administrative building so the	in a variety of ways: teachers use them in the classroom as part of community building and inclusion. We also hat admin staff can appreciate our wonderful Head Start as on our website, newsletters, advertisements, and
We will only use a child's photo with the express, written consent of the parent/guardian. Please complete the below form and return it to your child's teacher or family advocate.	
☐ I do give permission for CAAS Head Start to use photographs and/or video of my child internally (examples: on classroom walls and cubbies)	
I do give permission for CAAS Head Start to use photographs and/or video of my child externally (examples: on our website, brochures, advertisements)	
☐ I do not give permission for CAAS Head Start to use photographs and/or video of my child	
I understand how my child's photo may be used, and have had an opportunity to ask questions if I had them. I understand that this release form will apply for the duration of my child's enrollment in CAAS Head Start, and that I have the right to change my authorization at any time.	
(Parent/guardian name - <i>please print</i> )	(Parent/guardian signature)
(Date)	