



Photo Release Form

Child(ren)'s name(s) _____

Please circle below.

- I **do** / **do not** give permission for Pea Pods Child Care Center to take photos of my child while they are at Pea Pods Child Care Center or off-site activities.
- I **do** / **do not** give permission for Pea Pods Child Care Center to take videos of my child while they are at Pea Pods Child Care Center.

Photographs of the children include those of activities in the classroom, outdoor play, special occasions, or for projects.

I understand these photos will not be sold or distributed without my knowledge or permission.

Parent Name (please print) _____

Parent signature _____

Date: _____