



85-09 88 AVE.
WOODHAVEN NY, 11421
mypmdaycare.com

718-846-1650

MEDIA/PHOTOGRAPHY CONSENT AND RELEASE FORM

We would appreciate it if parents completed this consent form in order to allow their children to be photographed or videotaped during special events or normal day to day activities organized at My Precious Moments Daycare. In order for a child to have his/her photograph taken, he/she must have a consent form on file at My Precious Moments Daycare.

As the parent of a child at My Precious Moments Daycare, I agree to the following:

- I understand that my child whose name is listed below may be photographed during special events, trips, or normal day to day activities
- I understand that these photographs may be display at the daycare wall, arts/crafts projects and/or mounted in our website and facebook page.

YOUR CHILD'S NAME

() Yes, I confirm that I have read and understood the above, and agree to have my child's photos display at the daycare wall, arts/crafts projects and/or mounted on My Precious Moments Daycare website and facebook page.

() No, I do not wish to have my child photographed.

Name (please print)_____

Signature_____ Date: _____