

I,, give permission for Extreme Aventura Preschool to		
(Parent or Guardian name)		
photograph my child,	for the followi	ng purpose(s):
(Child's		
(Please check off)		
Type of Use:	Grant Permission	•
Photos posted online (ie. school website, Facebook page, etc.)		
Photos for promotional use within the community (ie. bulletin board, onscreen, etc.)		
Photos printed on flyers/ promotional use other than above		
*NO NAMES will <u>ever</u> be displayed. I understand that it is my responsibility to wish to authorize one or more of the above Signed:	•	event that I no longer
(Parent or Guardian signature)		(Date)