

***CONSENT TO TAKE***

***PICTURES OF STUDENTS***

**We / I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ parents / legal**

**guardians of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_name of child**

**agree to allow Sunshine House Preschool Inc. to take photos of my child for classroom use or school use.**

**Pictures are taken of my child while he or she is involved in classroom activities or outside playground activities and can be used for the classroom school use only.**

**This consent form is good for the duration of my child’s attendance at Sunshine House Preschool.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent(s) / Guardian’s Signature Date**

**I do not wish to give consent to have my child’s picture taken.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent(s) / Guardian’s Signature Date**