



l,	_give permission to Brana Play School
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to photograph my child, _____, for the following purposes:

Type of Use:	(Please check one)	
	Grant Permission	Decline Permission
Display photos on Brana Play School's website		
Post photos on Brana Play School's Facebook page		

* I agree to update this form in the event that I no longer wish to authorize one or more of the above uses. This form will remain in effect during the term of my child's enrollment at the school.

Signed:

(Parent or Guardian signature)

(Date)