

SUNBEAM CHILDREN'S CENTER PHOTO RELEASE FORM

Ι,	, the parent of
wh	no attends Sunbeam Children's Center, agree to the following:

I understand that my child(ren) may be photographed at Sunbeam during normal operating hours, field trips, or activities. I understand that these photographs may be used in promoting child care services, either in print or on the Sunbeam Children's Center website.

With my signature below I grant permission for my child(ren) to be photographed, or their images recorded for print or electronic use in promoting Sunbeam's services. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I understand that there will be no payment for me or my child's participation in this release.

Parent/Guardian Signature	
Date	

Relationship to Child _____