

Barbara M. Tufts Cooperative Pre School
Photo Permission

Child's Name(s): _____

Occasionally pictures of the children attending our facilities may appear in newspaper articles, media publications concerning special events, community events, or on our website.

Please fill in the appropriate space below...

I, _____ the parent /guardian of _____
(Parent's Name) (Child's Name)
give permission for my child's picture to appear in the above mentioned media.

I, _____ the parent /guardian of _____
(Parent's Name) (Child's Name)
DO NOT want my child's picture to be published in any media.

Parent or Legal Guardian Signature

Date

(if you have more than one child please add them to this form)

****Please know that we will be taking all children's photos for use in such things as art projects and classroom decorations within the facility****