



Picture Permission Form

Child's Name _____

Please check one selection:

_____ I give permission for my child's picture to appear on the preschool website, Facebook page, and any other publications by Faith Preschool.

_____ I give permission for my child's picture to be taken for **classroom projects only**. Please **DO NOT USE** on preschool website, Facebook page and any other publications by Faith Preschool.

_____ I **DO NOT** give permission for my child's picture to be taken. Please **DO NOT USE** in classroom or on preschool website, Facebook page or any other publications by Faith Preschool

Parent/Guardian's Name

Parent/Guardian's Signature

_____ Date _____

Administrator's Signature

_____ Date _____

****If you change your mind about your selection, please speak with Director in person.**