

Adventures In Learning Preschool



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Media Consent Form

Parent/guardian's name: _____

Child's name: _____

I authorize permission for the owner and employees of Adventures In Learning Preschool, LLC to:

- take pictures of my child
- take videos of my child
- post pictures of my child on the preschool social media site
- use pictures of my child in newsletters for the preschool
- use pictures of my child for preschool marketing purposes

Parent Signature

Date

Parent Signature

Date