

**The Kid's Place at Slate Hill**  
**Photo Release Form**

As the parent / guardian of a child/children at The Kid's Place at Slate Hill, I agree to the following:

- I understand that my child(ren) whose name(s) are listed below may be photographed at The Kid's Place at Slate Hill during normal business hours, field trips or activities. \_\_\_\_yes \_\_\_\_no
- I give permission for my child(ren)'s photographs to be posted on The Kid's Place at Slate Hill website. \_\_\_\_yes \_\_\_\_no
- I give permission for my child(ren)'s photographs to be posted on The Kid's Place at Slate Hill Facebook page. \_\_\_\_yes \_\_\_\_no
- I give permission for my child(ren)'s photographs to be used in The Kid's Place at Slate Hill newsletter. \_\_\_\_yes \_\_\_\_no
- I give permission for my child(ren)'s photographs to be used in The Kid's Place at Slate Hill advertisements. \_\_\_\_yes \_\_\_\_no

The following are the name(s) of my child(ren) attending The Kid's Place at Slate Hill

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Parent's Name (please print)\_\_\_\_\_

Signature\_\_\_\_\_

Date\_\_\_\_\_