



## Consent for Use of Photographs & Video Image

I consent for photographs/video to be made of me or my child (or persons for who I am legal/custodial guardian). I understand that the photographs or video may be used in my client record, on the Big Hearts Little Hands Learning Center website, in pamphlets, brochures or in education and training materials.

By signing this form,

- 1) I understand that I will NOT receive reimbursement or payment of any kind from any party for use of these images.
- 2) I understand and acknowledge that these photographs/video will be available to the general public, and that although they will be used without identifying information such as my name, I understand that it is possible that someone may recognize me or my child.
- 3) I understand that my child's attendance is NOT contingent upon my signing this form or agreeing to the use of my image for any purpose listed on this form.
- 4) I understand that I can revoke this consent for either myself or my child/children at any time. All photographs/videos that were taken of me or my child previous to the dated revocation are property of Big Hearts Little Hands Learning Center. A request to revoke this consent must be provided in writing to the Center Director.
- 5) I confirm that this consent form has been explained to me in terms which I understand.

Signature of Parent or Legal Guardian: \_\_\_\_\_

Printed Name of Parent or Legal Guardian: \_\_\_\_\_

Relationship to Minor Child(ren) Listed Below: \_\_\_\_\_

Name & DOB of minor child/children for whom you are providing consent in addition to yourself.

Minor Child's Name \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Birth