

# Photo Authorization Form

We would like to capture photos of your children in their daily activities to be used for \_\_\_\_\_.

Choose one of the following options:

- Yes, I authorize photos of my child(ren), \_\_\_\_\_, to be taken and published for use by the provider.
- Yes, I authorize photos of my child(ren), \_\_\_\_\_, to be taken but only to be shared with me and NOT published in any form.
- No, I do not authorize photos of my child(ren), \_\_\_\_\_, to be taken OR published in any form



\_\_\_\_\_

Parent's Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Provider's Signature

\_\_\_\_\_

Date

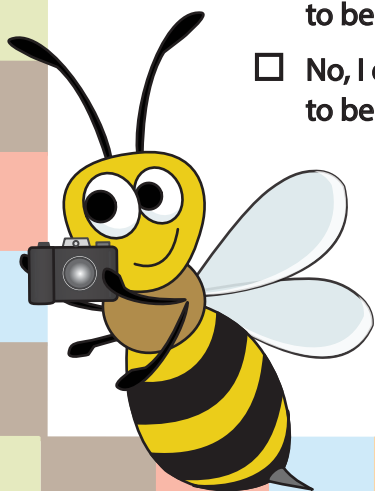
©FunShine Express

# Photo Authorization Form

We would like to capture photos of your children in their daily activities to be used for \_\_\_\_\_.

Choose one of the following options:

- Yes, I authorize photos of my child(ren), \_\_\_\_\_, to be taken and published for use by the provider.
- Yes, I authorize photos of my child(ren), \_\_\_\_\_, to be taken but only to be shared with me and NOT published in any form.
- No, I do not authorize photos of my child(ren), \_\_\_\_\_, to be taken OR published in any form



\_\_\_\_\_

Parent's Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Provider's Signature

\_\_\_\_\_

Date

©FunShine Express