

We will use video and/or pictures and written or verbal quotes only with your written Permission. Please review the following options then sign and return to office personnel.

#### Picture Process:

- Pictures will be taken during regular class times.
- Pictures will be edited and used to create video for promotional use, newsletters, websites, and training manuals and/or school displays.

I hereby release photographer and Daisy Child Development Center from all claims a liability relating to said photographs.
Child's Information:
Child's full name: <u>Jacoby</u> Anton Jacques
Parent/Guardian Permission: □ I grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
□ I do not grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
Parent/Guardian Full Name: Wesley Jacques
Parent/Guardian Signature:
Date: 6/6/14



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Child's Information:
Child's full name: Porg Carlberg
Parent/Guardian Permission:  I grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
☐ I do not grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
Parent/Guardian Full Name: Sarah Wriberg
Parent/Guardian Signature:
Pate:



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iability relating to said photographs.
Child's Information:
Child's full name: Stephen Mo Barntt
Parent/Guardian Permission:
Parent/Guardian Permission:  I grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
□ I do not grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
Parent/Guardian Full Name: Kelly Barnett
Parent/Guardian Signature:
Date: 6/6/14



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Child's Information:
Child's full name: 19 01 4 10 10 10 10 10 10 10 10 10 10 10 10 10
J
Parent/Guardian Permission:  I grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
and written quotes and/or video of my child and myself.
Parent/Guardian Full Name: KHO DOULU
Parent/Guardian Signature:
Date:



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Child's Information: Child's full name:  Dygust Bailey
Parent/Guardian Permission:  I grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
☐ I do not grant Daisy CDC permission to publish pictures, verbal and written quotes and/or vide of my child and myself.
Parent/Guardian Full Name: Manufacture Manufacture Manufacture
Parent/Guardian Signature: /// //// // // // // // // // // // //
Date:



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Child's Information:
Child's full name: Julian H. Du
Parent/Guardian Permission:  I grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
☐ I do not grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
Parent/Guardian Full Name: MWVa L. BW
Parent/Guardian Signature: Www. L. P. D. C.
Date: QQQQIY



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Child's full name: <u>Jacob Omari</u> , Battiest
Parent/Guardian Permission:  If grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
□ I do not grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.  Parent/Guardian Full Name:
Parent/Guardian Signature:
Date: 6/6/14



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Child's full name: KURT Jacob Stewart	
Parent/Guardian Permission:  Grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.	
☐ I do not grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.	
Parent/Guardian Full Name: <u>Theodisa</u> Battiest	
Parent/Guardian Signature:	
Date: 6/6/14	1



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Child's Information:
Child's Information: ALFOYSO  Child's full name: MICAH CASTILLO
Parent/Guardian Permission: I grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
□ I do not grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
Parent/Guardian Full Name: MADELEINE CASTILLO
Parent/Guardian Signature:
Date: 4/4/2014



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Child's Information:
Child's full name: Nova Schatz
Parent/Guardian Permission:
□ I do not grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
Parent/Guardian Full Name:
Parent/Guardian Signature: Colin Schut
Date: $\frac{6/06/2014}{}$



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Child's full name: Why Wholiewer
Parent/Guardian Permission:
CDC normiceInti ti titulisti piotaroo, voine
written quotes and/or video of thy office and my
Abliah niaturas varhal
☐ I do not grant Daisy CDC permission to publish pictures, verbal
and written quotes and/or video of my child and myself.
Parent/Guardian Full Name:
Parent/Guardian Signature:
Date: 6614
- ·



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Child's full name: EVELYN SIOBHAN DUVERNAY
Parent/Guardian Permission:  X I grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.
☐ I do not grant Daisy CDC permission to publish pictures, verbal and written quotes and/or video of my child and myself.  Parent/Guardian Full Name:
Parent/Guardian Signature: Muelle lucancie
Date: 6-6-14