

**Child Development Center
1205 Ashville Road
Suite 200
Montevallo, AL 35115
(205) 665-5437**

Photography Consent Form

Dear Parent /Guardian

As the parent of a child/children at Milestone Academy & Child Development Center, I agree to the following:

I understand that my child(ren) whose name(s) are listed below may be photographed at Milestone Academy & Child Development Center during normal daycare hours, field trips, or activities. I understand that these photographs may be used in promoting child care services, either in print or on the Internet.

Parent / Guardian Name:		Relationship to Child:	
Child 1 Name:			
Child 2 Name:			
Child 3 Name:			
Address:			
City:		State:	Zip:
I give permission for my child(ren) to be photographed, or their images recorded for print or electronic use in promoting Milestone Academy & CDC's child care services. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I agree that this form will remain in effect during the term of my child's enrollment. I understand that there will be no payment for me or my child's participation.			
Parent Guardian Signature:		Date:	