



PHOTO CONSENT

I understand that my child(ren) whose name(s) is/are listed below may be photographed at Energy Capital Cooperative Child Care during normal daycare hours, activities or events. I understand that these photos may be used to promote ECCCC, either for print or electronic use.

Parent/Guardian Name	Relationship to child
Child Name	
Child Name	
Child Name	
Address	
I give permission for my child(ren) to be photographed, or other images recorded for print or electronic use. 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 for the duration of my child's enrollment and that there will be no payment for my child's participation.	
Parent/Guardian Signature	Date

PERMISSION FOR WALKS

Sometimes, we just need to go out for a walk in the neighborhood! I understand that my child(ren) may be taken for walks in the neighborhood by ECCCC staff.

Parent/Guardian Name	Relationship to child
Child Name	
Child Name	
Child Name	
I give permission for my child(ren) to be allowed to take walks in the neighborhood. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize my child to participate in walks. I agree that this form will remain in effect for the duration of my child's enrollment.	
Parent/Guardian Signature	Date