



# Photo Release Form

-YES, I grant permission to use photos of my child: \_\_\_\_\_

(Check all that apply)

\_\_\_\_ Cubby

\_\_\_\_ Mailbox/ Top Cubby

\_\_\_\_ Classroom Bulletin Board

\_\_\_\_ Class Newsletter

\_\_\_\_ ProCare App

\_\_\_\_ ProCare app with other children in the photo

\_\_\_\_ Social Media such as Facebook or Instagram\*\*

\_\_\_\_ Hilltop Preschool Website \*\*

\*\*Please note that children's names are never used\*\*

-NO, I do not want any photos of my child taken \_\_\_\_\_

\_\_\_\_\_  
Parents Name

\_\_\_\_\_  
Parents Signature

Date: / /