Chapel of the Cross Lutheran Preschool

Photo Release

Chapel of the Cross Lutheran Preschool

Please be advised that your child may be photographed and/or recorded during various school activities.

Initial on the line to mark your choice. You will need to initial <u>2</u> choices.

_____Yes, I give permission for my child's photograph or video to be posted on the <u>class messaging app (SeeSaw</u>) for view of class families only.

_____ Yes, I give permission for my child's photograph or video to be posted on the <u>Chapel of the Cross Lutheran Preschool</u> <u>Facebook page</u> or for marketing and social media purposes.

_____ **No**, I do not give permission for my child's photograph or video to be posted on <u>the class messaging app (SeeSaw</u>) for view of class families only.

No, I do not give permission for my child's photograph or video to be posted on the <u>Chapel of the Cross Lutheran Preschool</u> <u>Facebook</u> page or for marketing and social media purposes.

Parent/Guardian Signature

Date

Student First and Last Name

