**Photograph and Social Media Consent Form**

The undersigned parent consents to release of any images and/or video taken of his/her child(ren) taken by any Magnificent Minds Daycare employee, or any media representation for new and/or publicity purposes on Magnificent Minds Daycare website, newsletters, publications, bulletin boards, emails and social media sites.

I understand that I will not receive numeration for voluntary participation or future use of any images and/or video of my child(ren). I understand that images and/or video for the media and/or world wide web may be used in publications and/or web sites outside of Magnificent Minds control.

 I understand that I may revoke this consent at any time by notifying Magnificent Minds in writing. This consent expires upon written notice from parents.

YES I give consent for my child’s photos/videos to be taken and released by Magnificent Minds Daycare

 NO I DO NOT give consent for my child’s photos/videos to be taken and released by Magnificent Minds Daycare.

Childs Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date: \_\_\_\_\_\_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**