



**RELEASE FORM
2016-2017**

I am the parent/legal guardian (circle one) of _____ who is a minor child. Child's Name

EXTERNAL USE

The Preschool Place & Kindergarten at Temple Shalom would like to use your child's picture and/or name in different forms of **EXTERNAL** advertising to promote the school. Uses will include, but are not limited to: Facebook, brochures, newspapers, promotional CDs and public pages of our website. Your signature gives us permission and is an agreement to release us from any liability that may occur and/or any claims resulting from or related to our use of pictures and/or names.

Check ONE of the following options for **EXTERNAL USE**:

- I have read the paragraph above and authorize, confirm and ratify the granting of permission on his/her behalf as explained above.
- I have read the paragraph above and authorize, confirm and ratify the granting of permission on his/her behalf as explained above with the exception of _____.
- I have read the paragraph above and deny permission on his/her behalf for any use of his/her picture.

INTERNAL USE

The Preschool Place & Kindergarten at Temple Shalom would like to use your child's picture and/or name in different forms of **INTERNAL** use. Uses will include, but are not limited to: class projects, school displays, the yearbook, video montages, photos on the **PASSWORD PROTECTED FAMILY LOG-IN** on our website. Your signature gives us permission and is an agreement to release us from any liability that may occur and/or any claims resulting from or related to our use of pictures and/or names.

Check ONE of the following options for **INTERNAL USE**:

- I have read the paragraph above and authorize, confirm and ratify the granting of permission on his/her behalf as explained above.
- I have read the paragraph above and authorize, confirm and ratify the granting of permission on his/her behalf as explained above with the exception of _____.
- I have read the paragraph above and deny permission on his/her behalf for any use of his/her picture.

DATE _____ Signature of Parent/Legal Guardian _____ Print Name _____

Name of Child's Teacher _____