



Little Lambs of Grace Preschool

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Little Lambs of Grace Photo Release

Students Name _____

I/We the parents and/or legal guardians of the student enrolled recognize that the photographs may or might be taken by the school or on behalf of the school from time to time; that such photographs may come to be used by Little Lambs of Grace for:

(Please place a check next to the media form in which your child's image may be used)

_____ School Brochures/Advertisement

_____ Yearbook

_____ Videos

_____ Facebook

_____ Website

Little Lambs of Grace is expressly granted the right to the use of all such photographs and I/We understand that we will receive no specific, individual monetary consideration therefore.

Disclosure: Little Lambs is not responsible for any pictures that are taken at special events (Example: Programs, birthday parties, etc.).

Father's signature: _____

Mother's signature: _____