**TRIBAL CHILD CARE ASSOCIATION**

**PHOTOGRAPHY/PUBLICITY RELEASE**

Dear Parent/Guardian:

Tribal Child Care Association (TCCAC) requests your permission to reproduce through printed, audio, visual, or electronic means activities in which your child has participated in his/her education program. Your authorization will enable us to use specially prepared materials to (1) train teachers and/or (2) increase public awareness and promote improvement of education programs through the use of mass media, displays, brochures, websites, etc. We may also use anecdotal notes and observations to be able to provide individualized developmental strategies, curriculum and perform assessments for children in our programs.

Name of student/child(please print)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent/Guardian (please print)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, as parent/guardian, of the above names child fully authorize Hand-in-Hand Learning Center to print, photograph, record, or use the name and/or image, likeness, or voice of the above named child on audio, video, film, slide, or any other electronic and printed formats, currently developed, for the purpose related to the above.

There will be no compensation to any of the above parties for the use of stated images, voice or recordings.

Signature of Parent/Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_