

Release of Information

_____ Alphabet Academy, LLC has my permission to photograph my child. I understand the photos may be used for the classroom, scrap booking, periodical local newspaper publication, and our Alphabet Academy website. When published in the newspaper or the website, names will not be included, only the name of our school and the classroom.

_____ As your children form friendships at Alphabet Academy they often wish to play together outside of school. We also have parents request information about other parents for birthday invitations. I understand that this information will only be given to those parents currently enrolled at Alphabet Academy. Please indicate this contact number below:

I have read and understand the aforementioned paragraphs. My initial next to each denotes permission for that line item. I realize that I have full authority to change any and each item as I deem necessary.

Child's name: _____

Parent's name: _____

Parent's Signature: _____

Today's Date: _____