

Permission for Photography | Model Release

For valuable consideration received, I grant to Tikiland Daycare & Preschool ("Photographer") and their legal representatives and assigns, the irrevocable and unrestricted right to use and publish photographs of me (of my ward and/or child), or in which I may be included, for editorial, trade, advertising, and any other purpose and in any manner and medium; and to alter and composite the same without restriction and without my inspection or approval. I hereby release Photographer and their legal representatives and assigns from all claims and liability relating to said photographs and uses thereof.

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| | SIGNATURE OF PARENT/GUARDIAN |
| | |
| | PARENT/GUARDIAN FULL LEGAL NAME (Print Name) |
| | CHILD'S FULL LEGAL NAME (Print Name) |
| | DATE |
| | PHONE |
| | STREET ADDRESS |
| | CITY, STATE, ZIP |
| Х | |
| | SIGNATURE OF WITNESS (Tikiland Daycare & Preschool Staff) |
| | WITNESS (Print Name) |