

**OLIVE'S LIL' ANGELS LEARNING CENTER
PARENT'S PERMISSION TO PHOTOGRAPH**

I, _____, give Olive's Lil' Angels Learning Center (OLALC)
(Parent/Guardian)

permission to take _____ photographs, video footage, and/or
(Child's Name)

digital imagery (digital camera). I understand that it may be used for public viewing or any form of

publication (brochures, websites, advertising material, etc.).

Parent's Signature _____

Date _____