



Children of Hope Child Development Center  
**Photo Release Form**

I, \_\_\_\_\_ hereby authorize \_\_\_\_\_  
(Parent or Guardian) (Name of Student)

to participate in the making of projects consisting of photographs, video, film production, internet / website titled “Children of Hope Preschool” on or about the 2026-2027 school year. I understand that Children of Hope Child Development Center shall hereby retain any and all rights in the photograph(s), or video/film production, internet/website, including but not limited to, the right to reproduce, copy, edit, exhibit, publish, or distribute such photograph(s), video, film and/or internet.

Parent or Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I **do not** want my child \_\_\_\_\_(Name of Student)

to be pictured on the public Facebook, Instagram or in marketing materials.

Parent or Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_