Photograph Permission Form

Please fill out in full detail.



Child's Name*	
Please indicate which of the following purposes you would like to give permission photographs of your child:	on for Little Sprouts Learning Center to use
Display inside the center (classrooms & hallways):	• Yes O No
Display on littlesproutslearningcenter.net:	O Yes O No
Display on Little Sprouts Learning Center Facebook Page (Facebook, Instagram, etc.) :	O Yes O No
Other	O Yes O No
Additional Comments*	
I understand that it is my responsibility to update this form in the event that I no longer wish to authorize one or more of the above uses. I agree that this form will otherwise remain in effect during the term of my child's enrollment.	
Submit →	