



Permission to Use Photographs and Video Recordings

I hereby authorize the ParentChild+ of _____ and/or The ParentChild+ National Center to make video recordings and take photographs of myself, my children, and/or my family in conjunction with ParentChild+ activities, including home visits and special events.

I understand that these photographs and video recordings will be used only for informational, educational, and training activities by the ParentChild+ of _____ and/or the ParentChild+ National Center.

Parent Name/Child Name

Parent's Signature

Date