



Grandma's Touch

Photography Release Form

I, (print name) _____, parent or official guardian of (child's name) _____ hereby grant permission to **Grandma's Touch Child Care**, to take and use: photographs and/or digital images of my child for use in news releases, educational materials, and/or marketing as follows: printed publications or materials, electronic publications, or Websites. I authorize the use of these images without compensation to me.

_____ (Date)

_____ (Signature of Parent or Guardian)