PHOTO/ VIDEO RELEASE

I give permission for photographs, images, video or audio recordings of my child/ dependant/ self, and/or copies captured via still photography, video or audio tape recordings, to be used at no charge in connection with activities of the Morgan Hill Parent Child Nursery School. I understand that such images will become the property of the Morgan Hill Parent Child Nursery School and may be used for educational and promotional publications, to be reproduced and distributed to the general public including usage in commercial advertising and the Internet.

I understand that these images will not be used for commercial gain and will not be sold by Morgan Hill Parent Child Nursery School to anyone for commercial use. I understand and agree to the above-stated conditions.

_____Date_____
Signature of Parent or Legal Guardian

PLEASE PRINT

Name of Parent:_____

Name of Child :_____

Address:_____

City:_____

State / Zip:_____

Morgan Hill Parent Child Nursery School, 16870 Murphy Ave., Morgan Hill, CA 95037, (408)779-4515