



**PHOTOGRAPH
AUTHORIZATION**

I give Little L.A.M.B.S. Preschool authorization to take photographs of my child/children during social events. Some of the photos may be of just my child and some may be group photos. On occasion, they may be published on our Facebook page or website.

I give permission _____

I DO NOT give permission _____

Signed: _____ Date: _____
(Parent/Guardian)

Signed: _____ Date: _____
(Director/Employee-In-Charge)



**PHOTOGRAPH
AUTHORIZATION**

I give Little L.A.M.B.S. Preschool to take photographs of my child/children during social events. Some of the photos may be of just my child and some may be group photos. On occasion, they may be published on our Facebook page or website.

I give permission _____

I DO NOT give permission _____

Signed: _____ Date: _____
(Parent/Guardian)

Signed: _____ Date: _____
(Director/Employee-In-Charge)