Planting the seeds of early education since 1990

wcfnp@btconnect.com

Photograph/Video Permission Form

I am the parent/legal guardian of the child named below and I give permission for my child to be photographed or videotaped whilst in the care of Wavertree Christian Community Centre both within the setting and whilst on outings, for the following purposes (please tick all that apply);

o Photo Albums (including digital photo frames used within the setting

o Displays including those in public areas within the setting

o Staff coursework (this may include work submitted to external agencies)

o Printed media (including marketing materials to be used by Wavertree Christian Community Centre only but which may be distributed in the local community e.g. Prospectus)

o Setting website

I am aware that Wavertree Christian Fellowship Nursery has an acceptable user policy for the use of all technologies and in relation to the taking and storing or digital images.

Child’s Name (block capitals)

…………………………………………………………………………………………..

Parent’s Name:

…………………………………………………………………………………………

Parent/carers signature………………………………………………….

Date: ………………………………………………

Reviewed by Beverley Stephenson

Nursery Manager