

# MIRACLES

## LEARNING CENTER

### Photo and Audio/Video Recording Release

I consent to the use and copyright of photographs or videos in which my child is included for use in publications for Miracles Learning Center.

I acknowledge that Miracles Learning Center is the sole owner of all photographs or videos in which my child may be included, and can use them as well as any printed or electronic matter related to photographs or videos both now and in the future.

I release Miracles Learning Center, and its legal representatives from any legal responsibility related to photographs or videos in which my child is included.

By signing this Consent Release form, I hereby give permission which signifies that photographic or video recordings of my child may be electronically displayed via the Internet, or for marketing and informational purposes for Miracles Learning Center.

\_\_\_\_\_  
Name of Child

\_\_\_\_\_  
Age

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Printed Name

*We are looking forward to making great memories with your child!*