



Bryan's Educational Center
3922-24 Church Avenue Brooklyn • New York 11203
Phone: (718) 282-6944 Fax: (718) 282-8074
bryansdaycare@aol.com

CONSENT FORM

Community Walks/Field Trips

I hereby give permission to allow my child (Child's Name): _____ To be taken on trips to points of interest throughout New York / New Jersey area under the authorized supervision of the Bryan's Educational Center, Inc. via bus or other suitable means of transportation. I also grant permission for my child to be taken on walking trips throughout the neighborhood, when accompanied by his / her teacher.

PARENT'S SIGNATURE: _____ DATE: _____

CONSENT TO PHOTOGRAPH, FILM, OR VIDEOTAPE A STUDENT

Name of Student

Bryan's Educational Center, Inc.

Class

I, _____ (parent or guardian), hereby consent to the participation in interviews, the use of quotes, and taking of photographs, movies or videotapes of my son/daughter by **Bryan's Educational Center, Inc.**

I also grant to **Bryan's Educational Center, Inc.** the right to edit, use and reuse said products for further advertisement.

I also hereby release **Bryan's Educational Center, Inc.** from all claims, demands, liabilities whatsoever in connection with the above.

Signature of Parent or Guardian

Address of Parent or Guardian