



Permission to Photograph

I give my permission for **Issaquah Children's Academy** to photograph my child, _____ and to show, sell or give the photographs to other parents, enter them in photography contests, publicly display them, or use the photographs for other promotional purposes. **Issaquah Children's Academy** will not disclose last names of subjects in photos, unless given my specific written permission. I understand that it is not the intent of **Issaquah Children's Academy** to take or use photographs in any demeaning or harmful manner, and that photos will be appropriate and used with good judgement.

Parent Signature: _____

Date: _____