Happy Minds Kids Academy

AUTHORIZATION TO PHOTOGRAPH AND/OR RECORD

Name of Student: .................................................................

☐ I hereby authorize the Administration and Staff of Happy Minds Kids Academy to:

___ photograph  ___ audiotape  ___ videotape my child’s participation in school activities
at Happy Minds Kids Academy.

I understand that photographs and tapes will not be made without the knowledge of the participants, and
that they are subject to the rules of confidentiality and will not be shown to any other person or persons,
except for those children and families participating in school’s activities, prospective students and families,
and for brochures/websites/social media advertising the school’s program.

I understand that the photographs and tapes remain the property of the school and that the director and
teacher are legally responsible for them unless I sign a written release. I further understand that if I agree
to the release of any photographs or tapes to another person or persons in writing, the school is no longer
responsible for the confidentiality of the material or in control of the use of the material contained on the
tape or photograph. (Requests for the immediate erasure of a tape or destruction of a photograph and
negative or digital image must be made in writing.)

This release/waiver is good for the entire school year/s in which my child is enrolled at the
Happy Minds Kids Academy.

SIGNED: ______________________________________________________

NAME:________________________________________________________

RELATIONSHIP TO CHILD: _________________________________

DATE: ______________________________________________________

A PHOTOCOPY OF THIS RELEASE SHALL BE CONSIDERED AS VALID AS THE ORIGINAL.

☐ I DO NOT authorize Happy Minds Kids Academy Administration and Staff to
photograph/audiotape/videotape my child’s participation in school activities.

SIGNED: ______________________________________________________

NAME:________________________________________________________

RELATIONSHIP TO CHILD: _________________________________

DATE: ______________________________________________________

** This waiver supersedes all previous waivers. 10/01/2015