



Temple Beth Shalom • Nursery School • 2016-2017

Activity and Photograph/Film Permission Slip • Please Return by 8/12/2016

I grant permission for my child to participate in all of the activities of the **Early Childhood Center at Temple Beth Shalom.**

Throughout the year we may digitally photograph or video/film the children enjoying their activities at the Temple. For non-profit purposes, we also have the opportunity to display and distribute to our families photos of the children in print, electronic publications, or on our website. Occasionally, we may submit a photo for a press release, of which we will keep you informed should it occur.

By signing below you grant permission for your child to be included in all of the above.

Child's Name: _____

Parent's Signature: _____

Date: _____

