



THE LEARNING CENTER

AT LIVING WORD LUTHERAN CHURCH

I, _____, give permission for The Learning Center to
(Parent/Guardian Name)
photograph my child _____, for the following
(Child's Name)
purposes:

Type of Use:	Grant Permission	Decline Permission
Display in classroom/throughout TLC	☐	☐
Display in TLC flyers and advertisements	☐	☐
Display on TLC's website, Facebook, Google & other social media accounts	☐	☐

I understand that it is my responsibility to update this form in the event I no longer wish to authorize one or more of the above uses. I agree that this form will remain effective from August 5, 2026 – August 6, 2027.

Signed: _____
(Parent/Guardian Signature)

(Date)