



Social Media Photographic Release Form

I, _____, the parent/guardian of _____
_____ (child/children) who attend Family Day Care Services,
agree to and grant permission for the use of my child's image in the following formats:

- | | |
|--|----------|
| 1) Promotionally on the Bathurst Regional Council Children's Services Public Facebook Page | Yes / No |
| 2) Print media and Promotional items for Bathurst Regional Council Children's Services | Yes / No |
| 3) Bathurst Regional Council Children's Services Website | Yes / No |
| 4) Educational purposes on enrolled Educators Facebook Page | |
| a. Public Facebook Page | Yes / No |
| b. Private Facebook Page | Yes / No |
| 5) Family and Educational newsletters within Bathurst Regional Council Children's Services | Yes / No |
| 6) Media (i.e. local newspaper, news station) | Yes / No |

By signing this release, I understand this permission signifies that photographic images/video of my child may be electronically displayed via the internet or in the public educational setting.

By signing this form, I acknowledge that I have completely read and understood the above release and agree to be bound thereby. I hereby release any and all claims against any persons or organisation utilising this material for promotional or education purposes.

I agree this permission will be valid until such time that my child no longer attends Family Day Care Services, or that a written withdrawal of the Media Consent is supplied.

Signature: _____ Date: _____