PEACE AND NEVAEH CHILD CARE CENTER

Parent/Guardian Photo, Video, Audio & Media Release Authorization

3437 N. 20th Street, Milwaukee, WI 53206 | 414-628-3026

Child's Full Name: _____ **Date of Birth:** _____

Parent/Guardian: _____ **Date:** _____

Purpose and Voluntary Consent

PNCC may photograph, video record, or audio record children during learning activities, celebrations, field trips, and other program experiences. Public or promotional use requires parent/guardian permission. Consent is voluntary, and declining permission will not affect a child's enrollment, participation, treatment, or quality of care.

MEDIA USE - CHECK ONE FOR EACH	YES	NO
Photograph my child	☐	☐
Video record my child	☐	☐
Audio record my child	☐	☐
Use media in PNCC newsletters, displays, portfolios, or materials shared with enrolled families	☐	☐
Post media on PNCC public social-media accounts	☐	☐
Use media on PNCC's website or other official online presence	☐	☐
Use media in PNCC advertisements, flyers, brochures, or promotional materials	☐	☐
Use media for community events, presentations, public promotion, or appropriate entertainment content related to PNCC	☐	☐

Child Identification

☐ I authorize PNCC to use my child's **first name only** with approved media. ☐ My child's name may **not** be publicly identified.

PNCC will not publicly disclose a child's last name, home address, date of birth, medical information, enrollment records, or other confidential information through this authorization.

Terms of Authorization

I understand that approved media may be edited, reproduced, published, displayed, or distributed by PNCC for the purposes selected above. Publicly posted media may be viewed, copied, shared, downloaded, screenshot, or redistributed by others, and PNCC cannot completely control media after public release. PNCC will not sell my child's individual image or recording to an outside party under this authorization, and I will not receive compensation for authorized use.

Revoking Permission

This authorization remains in effect while my child is enrolled at PNCC unless I change or revoke it in writing. Revocation applies to future use after PNCC receives written notice. PNCC will make reasonable efforts to discontinue future use and remove media from PNCC-controlled platforms when reasonably possible, but cannot retrieve printed materials already distributed or copies previously shared or saved by others.

Parent/Guardian Authorization

I have read and understand this authorization, had an opportunity to ask questions, and voluntarily indicate my choices above.

Parent/Guardian Printed Name: _____ **Date:** _____

Parent/Guardian Signature: _____ **Phone/Email:** _____

PNCC USE ONLY: Received by: _____ Date: _____ Status: ☐ Approved as selected ☐ No public media authorization Staff initials: _____