

Photography Consent Form

Dear Parent/Guardian

As the Parent/ Guardian of a child/children at Baringa Child Care Centre, I agree to the following:

I understand that my child (ren) whose name(s) are listed below may be photographed at Baringa Child Care Centre during normal operating hours. I understand that these photographs of my child/children will form part of documented observations published by educators provided to families who access the **Quick Kids Early Years Learning Management** (QKeYLM) program and give my consent for this access, including both electronic storage and printing of any photographs that contain my child/children. For further information regarding QKeYLM please visit <http://www.qikkids.com.au/qkeylm> or talk to your child/ren's room leader.

Parent/Guardian Name		
Relationship to Child		
Child 1 Name		
Child 2 Name		
Child 3 Name		
Address		
City	State	Post Code

I give permission for my child(ren) to be photographed, or their images recorded for print or electronic use in documented observations and other activities available to families. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I understand that should I no longer wish to authorize the above uses, I will no longer be able to access the QKeYLM program. I agree that this form will remain current during the term of my child/ren's enrolment. I acknowledge that I am able to give this permission, and that there are no Parenting Orders or other court orders that would prevent my child being photographed.

Parent/Guardian Signature _____ Date _____