

# **Blessings From Above Christian Child Care Center**

## **Video Consent Form**

Name of Child: \_\_\_\_\_

Name of Parent: \_\_\_\_\_

I hereby give Blessings From Above the right to video tape my child in connection with childcare services at the facility. I understand that use of video equipment at the center is intended solely to monitor and review situations that may arise in the classroom. I also understand that the Director or Assistant Director be monitoring the system on-line throughout the day.

I hereby authorize the center to:

1. Record my child's participation and appearance on video tape, audio tape, film. Photography and any other medium.
2. Use my child's name, likeness and voice in connection with these recordings
3. Exhibit or distribute these recordings if requested by child care licensing or in any other legal matter.

I hereby release and agree to indemnify and hold harmless the center, k their employees and staff from and against all claims and liabilities arising out of the use of these video recordings. I understand that the use of video surveillance equipment at the child care center is only intended as a measure of protection for the children and the staff at the center.

Signature of Parent/Gaurdian

Date:

Signature of Director/Asst. Director

Date: