Teachable Moments Photo Release

I, the undersigned parent or guardian of the student designated below, on behalf of myself and on behalf of student, hereby grant permission to Teachable Moments Childhood Program, Inc., Teachable Moments Childhood Program II, Inc. (Highlands), and Teachable Moments Preschool, Inc. (collectively referred to as "TM"), to take photos of student and share and publish the same, with or without identification of the student, within the TM community (Teachable Moments' students and their families, staff, etc.). This includes Child of the month, Monthly calendar, bulletin boards, TM parties and events, and other opportunities during the school day.

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Please check the boxes below to indicate your student's photo participation (TM):	
My student may participate in	Individual photo: Group photo:
My student may not participate in	Individual photo: Group photo:
I agree to have student's picture taken individually or as part of a group. TM is using a third-party online platform, Brightwheel: Childcare App.	
Please check the boxes below to indicate your student's photo participation (Brightwheel):	
My student may participate in	Individual photo: Group photo:
My student may not participate in	Individual photo: Group photo:
I understand that TM will not take, use or publish my student's photos without my agreeing to this release of liability.	
I understand that I am not at this time giving TM the right to publish student's photos on social media or anywhere outside the TM community; however, I acknowledge that TM cannot control the actions of other students and parents, who may publish photos of their own children which include my student as well. I also understand that TM is not responsible for any criminal behavior by third parties who may hack into an online platform to steal personal information, including photos.	
I therefore release TM from all claims and liability whatsoever for use or publication of any photos of the student designated below. By signing this form, I agree to my student's participation based on my responses above.	
	Signature:
Name of Parent/Guardian:	
	Student Name: