



PERMISSION TO USE PHOTOGRAPHS

I hereby grant The Kinkaid School, Inc. the permission to include photographs of my child or photographs in which he/she may be included with others in official publications and web pages of The Kinkaid School, Inc. I also give permission to include my child's first name only on the web page and first and last name in written publications. I release and discharge The Kinkaid School, Inc. from any and all claims and demands arising out of or in connection with the use of such photographs

Name of Child (please print)

Name of Parent/Guardian (please print)

Date

Signature of Parent/Guardian