

# Photography Permissions

To:

**Mrs Katrina Young  
8 Glengarry Crescent  
Falkirk  
Stirlingshire  
FK1 5UD**

From:


**Date:**

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**Dear Mrs Young,**

**\* I/We give permission for you to take photographs of:**

(\* Delete as appropriate)

***Please give name of child(ren):***

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**With regard to day to day activities and progress checking.**

\* I/We understand that photographs of the child(ren) will NOT be posted on the internet.

\* I/We understand that the photographs will not be passed to third parties unless in conjunction with child welfare investigations from the appropriate authorities or the police and are aware that this may be done without \*my/our consent.

(\* Delete as appropriate)



Signed Parent:

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Print Name:

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Relationship to Child(ren):

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Date:

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