

HAPPY HOLLOW SCHOOL
29 Oaks Road
Framingham, MA 01702

PERMISSION TO PHOTOGRAPH AND VIDEOTAPE

2009-2010 School Year

By signing this form you are granting Happy Hollow School the right to photograph and/or videotape your child for use in classroom and school activities. These pictures may be used for art projects, parent gifts, classroom portfolios, student files, parent conferences and posted within the classroom.

On occasion, these photographs may be posted on our website or used in promotional material. If any photographs are visible to the general public, children's names will not be included.

I, being the parent/guardian of _____ give my permission to Happy Hollow School to photograph or videotape my child for the duration of the 2009-2010 school year.

Parent/Guardian Signature

Date