

STUDENT PHOTOGRAPHY AGREEMENT WITH SEW TEACH ME™

Please read the below text thoroughly, indicate your preference, sign and return to your mentor.

I understand that once my student's photograph is placed on the Internet, it can be viewed by anyone who has access to the Internet. It is being requested of me to provide consent in order for my child to receive recognition by the SEW TEACH ME program in local media, program website/Facebook page, etc.

Child's Name (please print)

Age

Please your preference:

- I DO** give permission for my child's photograph to be printed on the Internet or in any printed SEW TEACH ME related achievements, accolades, announcements, etc.
- I do NOT** give permission for my child's photograph to be used on the Internet or in any printed SEW TEACH Me publication.

Parent/Guardian Name (please print)

Phone Number

Email Address

Parent Signature

Date