

Colonial Nursery School, Inc.
Annapolis's Cooperative Preschool

PICTURE WAIVER

I, _____,
(printed parent's name)

give permission for Colonial Nursery School to use images of my child(ren),

(printed child's name) (printed child's name)

for promotional purposes only on the Colonial Nursery School website and other printed materials.

Signed _____ Date _____
(parent or guardian's signature)

Please complete and return to Colonial Nursery School with Health Forms. Thank you!