



TCDN Parent Agreement/ Consent Form

I/We \_\_\_\_\_, the parents (s)/legal guardian(s) of \_\_\_\_\_, acknowledge that I/we have downloaded, from the TCDN website, read and understand the following documents listed below. I have asked the Program Staff or the Director to clarify any policies, procedures or forms that are unclear to me/us. (Please initial each line and sign and date the bottom)

- \_\_\_ Civil Rights Compliance/Parent Awareness Form
- \_\_\_ IFSP, IEP, GIEP \_\_\_ will provide / \_\_\_ will not provide (please check one)
- \_\_\_ Nondiscrimination in Service Form
- \_\_\_ Emergency Operations Plan
- \_\_\_ TCDN Handbook Acknowledgement Form
- \_\_\_ Limited English Proficiency Policy Statement

As part of our programs, we take photographs and videos of children in action as they participate in classroom activities, field trips and other events. We use photos in newsletters, on the website, in marketing materials, and occasionally to acknowledge TCDN in local/regional newspapers. In addition, photographic images are used to document learning activities for families. In any use of images, names and other personal information will NOT be identified, unless first discussed with parents.

**Please complete the information below to indicate whether you do or do not give permission for TCDN to use your child’s photograph for any of the purposes described above. Thank you.**

Child’s Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

\_\_\_\_\_ I give permission for my child’s name and photo to be used in local newspapers, TCDN newsletters, TCDN publications and web pages, and classroom displays and learning activities.

\_\_\_\_\_ I **do not** give permission for my child’s name and photo to be used in local newspapers, TCDN newsletters, TCDN publications and web pages, and classroom displays and learning activities.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date