



## Early Learn I & III

### Audio/Video Recording/Photograph Release Form

I, \_\_\_\_\_, the parent/guardian of \_\_\_\_\_, grant Urban Strategies, Inc. permission to video/audio record and /or photograph my child. I also give permission for resulting digital output to be used for educational, marketing, and data collection purposes.

I also hereby release Urban Strategies Early Learn and its staff from all claims, demands, and liabilities whatsoever in connection with the above.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

Comments:  
\_\_\_\_\_  
\_\_\_\_\_