

**Permission for Use of Your Child's Picture
2016-2017**

Child's Name _____

I hereby give permission to Good Shepherd Evangelical Lutheran School to use my child's photo in circumstances including, but not limited to: advertising, newspaper submissions, website, and correspondence. I understand my child's name will not be listed with the photo.

I understand that I may withdraw this permission at any time, and will do so in writing.

Parent Signature _____

Date: _____

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