



Project P.L.A.Y. School Partners in Learning About You

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RELEASE FORM

I hereby give permission for images of my child, captured during regular Project P.L.A.Y. School activities through video, photo and in writing to be used for the purposes of promotion of Project P.L.A.Y. School.

Name of Participant:

Name of Parent/Guardian:

Parent / Guardian Signature:

I also hereby give permission for images (without facial recognition) of my child, captured during regular Project P.L.A.Y. School activities through video, photo and in writing to be used for the purposes of promotion of Project P.L.A.Y. School in conjunction with Bok tenants.

Name of Participant:

Name of Parent/Guardian:

Parent / Guardian Signature:

Permission for neighborhood/in building walks:

I hereby give permission for my child _____ to go on neighborhood walking adventures and visiting tenants in the Bok building (with clipboards) with Project P.L.A.Y. School teachers.