



OT4Kids PERMISSION FORM

DATE _____

PO BOX 587, Lexington NC 27293
Phone (336) 236-6546 Fax (336) 236-9546
www.ot4kidsinc.com contact@ot4kidsinc.com

OT4Kids displays printed photos of their clients and/or artwork by their clients for decoration. Your child's participation in these efforts is completely optional.

I, _____, the parent/guardian of _____
(PRINT NAME) (PRINT CHILD'S NAME)

give permission for the following to be used by OT4Kids for decoration, which may be visible to anyone visiting the OT4Kids office:

YES NO

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Photograph(s) of my child taken by OT4Kids

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Video of my child recorded by OT4Kids

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Audio of my child recorded by OT4Kids

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Artwork created by my child (showing their full name)

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Artwork created by my child (showing their first name only)

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Artwork created by my child (showing their last name only)

Other: _____

OT4Kids uses printed and internet material for educational and marketing purposes. Your child's participation in these efforts is completely optional.

I, _____, the parent/guardian of _____
(PRINT NAME) (PRINT CHILD'S NAME)

give permission for the following to be used by OT4Kids in their marketing materials:

YES NO

--	--

Photograph(s) of my child taken by OT4Kids

--	--

Video of my child recorded by OT4Kids

--	--

Audio of my child recorded by OT4Kids

--	--

Artwork created by my child (showing their full name)

--	--

Artwork created by my child (showing their first name only)

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Artwork created by my child (showing their last name only)

Other: _____

Signed _____