

CENTRE NAME:	ormerly hima
Participation Agreement to email and publish my child's work, photographs, or videos via Lillio	
To: Parent / Legal Guardian,	
Please read this page carefully as it includes information about safety and associated with privacy and behaviour.	security issues
In the interest of safety and security we require parent permission for the perhildren's work, photographs, or videos through a software program called "Program"). By signing this form, you grant permission for us to photograp child for the purpose of sharing this information with you through the Program to receive updates and information about your child through the Program to have provided herein.	d Lillio (the h or video your ram. You will also
Note that sometimes other children in the centre may feature in photos, vior of your child. By giving your consent, you agree not to share photos or vide other than your own, outside the Program without permission.	
To learn more about the Program, please visit <a href="www.lillio.com">www.lillio.com</a> . Please com return this form to the centre if you wish to participate. We encourage you you have any questions.	· -
I hereby acknowledge that I wish to voluntarily participate in this Program:	
My Child's Name:	
My Name:	

**Note:** Please complete the Participation Agreement for each parent / guardian of the child.

Date: \_\_\_\_\_\_.

My Email:

Signature: \_\_\_\_\_\_.