

LITTLE DISCIPLES LEARNING ACADEMY

PHOTO & MEDIA RELEASE AND PARENTAL CONSENT FORM

Legal Business Entity: DKS Holdings LLC

Mailing Address: 30 N Gould St, Sheridan, WY 82801

Website: ldla.org

1. CHILD & PARENT/GUARDIAN INFORMATION

Child's Full Name: _____

Parent/Legal Guardian Name: _____

Email Address: _____

Date: _____

2. PURPOSE OF THIS FORM

Little Disciples Learning Academy (LDLA), operated by DKS Holdings LLC, creates educational, faith-based, and promotional content to support its mission of nurturing children's learning, creativity, and spiritual development.

From time to time, LDLA may photograph, record, or feature children's participation in educational activities, virtual classes, projects, celebrations, and other school-related experiences.

This form allows parents and legal guardians to decide whether LDLA may use their child's photograph, video image, voice, or approved classroom work in its educational and promotional materials.

3. PARENTAL CONSENT SELECTION

Please check **one box in each applicable category** to indicate your preferences. You may grant permission for some uses and decline others. If no box is checked in a category, permission for that category will not be assumed.

A. LDLA Website

May LDLA display my child's photograph, video image, or approved classroom work on its official website, ldla.org?

☐ **YES, I CONSENT**

☐ **NO, I DO NOT CONSENT**

B. Social Media Platforms

May LDLA use my child's photograph, video image, voice, or approved classroom work in content published on its official social media accounts, including platforms such as YouTube, Instagram, Facebook, and TikTok?

☐ **YES, I CONSENT**

☐ **NO, I DO NOT CONSENT**

C. Educational Videos & Digital Learning Content

May LDLA include my child's image, voice, or participation in educational videos, virtual classroom recordings, Bible lessons, learning demonstrations, or other digital educational content?

☐ **YES, I CONSENT**

☐ **NO, I DO NOT CONSENT**

D. Marketing & Promotional Materials

May LDLA use my child's photograph, video image, or approved classroom work in promotional materials, advertisements, enrollment announcements, digital flyers, or other materials intended to promote the academy?

☐ **YES, I CONSENT**

☐ **NO, I DO NOT CONSENT**

4. ACKNOWLEDGMENT & TERMS OF CONSENT

By signing this form, I acknowledge and understand the following:

1. **Voluntary Participation:** Providing consent is voluntary. My decision to decline permission will not negatively affect my child's enrollment, access to educational services, or participation in LDLA activities.
2. **Permitted Use:** My consent applies only to the categories I have approved above. LDLA will not knowingly use my child's image or recordings for a category I have declined.
3. **No Compensation:** I understand that neither my child nor I will receive payment or other compensation for authorized use of photographs, recordings, or approved classroom work.
4. **Privacy & Identification:** Consent to use an image or recording does not automatically authorize LDLA to publish my child's full name, contact information, personal records, or other identifying information. Such information requires separate authorization where applicable.
5. **Online Distribution:** I understand that content published online may be viewed, copied, shared, or stored by third parties. Although LDLA will take reasonable steps to manage its own publications, it cannot guarantee the removal of content copied or redistributed by others.
6. **Withdrawal of Consent:** I may withdraw my consent at any time by submitting a written request to LDLA. Withdrawal will apply prospectively. LDLA will make reasonable efforts to stop future use and remove content under its control within a reasonable period, where practicable. Withdrawal may not undo prior authorized uses or guarantee removal from third-party platforms, copies, or materials already distributed.
7. **Authorized Representative:** I confirm that I am the child's parent or legal guardian, or otherwise legally authorized to provide this consent, and that the information provided is accurate.

5. FINAL CONSENT CONFIRMATION

Please select one:

☐ **I GRANT PARTIAL OR FULL CONSENT** according to the individual selections made in Section 3.

☐ **I DO NOT GRANT CONSENT** for LDLA to use my child's photograph, video image, voice, or classroom work in any of the categories listed in Section 3.

I have read and understood this form and have had the opportunity to make an informed decision regarding my child's participation in LDLA photography, recordings, and media content.

Parent/Legal Guardian Signature: _____

Printed Name: _____

Date: _____

Date Received: _____