EDCC Photo/Social Media Waiver



Student Name:	Date:
photos and/or videos as part of our of sharing these activities with the p photograph/videotape your child fo Facebook pages, EDCC website, par	ent newsletters, center displays, time Parent Portal site. We will never
By signing below you are giving EDO and/or videotape your child for the	
Parent/Guardian's Name:	
Parent/Guardian's Signature:	