PERSONAL RELEASE

I understand that video sequences or photographs in which I and/or my child participate may be included in videotapes and other materials for educational purposes. They are being produced by WestEd in collaboration with the California Department of Education for long-term use in the professional development of providers of quality care for young children and/or the dissemination of the Program for Infant/Toddler Caregivers materials and training opportunities.

I hereby acknowledge that my participation or image may be edited and used in whole or part, as desired for these purposes, and, insofar as I am concerned, may be prepared and produced, recorded and duplicated, broadcast and transmitted, posted on the internet, exhibited, distributed and viewed in educational institutions, public agencies, training workshops, community centers, child care centers and homes, and for institutional and other educational purposes worldwide without restriction. I also consent to the use of my name, likeness, voice, and biography for informational purposes in conjunction with these purposes.

Name of Participant ___________________________ Date: __________________

Address: ________________________________________________

Phone: ____________________ Signature: ______________________

(Parent, if participant is a minor)