



**Permission to use video or pictured image & audio recording**

\*\*\*This form must be signed in order for your child to participate in the program\*\*\*

The use of video, picture image and audio recordings are an essential component to The Social Learning Connection. We must be allowed to use these types of recordings in order to have your child participate in our program.

Please check the first box to indicate that you will allow these recordings and wish to participate in our program:

I give permission for The Social Learning Connection to use the image of my child:

\_\_\_\_\_, within the Social Learning clinic setting for educational purposes.  
Please print child's name attending SLC

I give permission to audio/video tape my child for educational purposes.

Occasionally in the course of recording during group therapy sessions or camp we will capture an interaction that accurately illustrates a particular concept or strategy of the social learning philosophy of SLC. In this instance we would like the opportunity to use this video in a training/conference setting. The video will be used to educate fellow professionals about how to employ techniques that are being discussed.

*Check only if you are comfortable with this option:*

I give permission for video or pictures of my child to be used in **both** clinic and conference settings.

\_\_\_\_\_  
\*\*Parent's Signature

\_\_\_\_\_  
Date

**The Social Learning Connection**  
**Fort Worth, Texas**  
[SocialLearningConnection.com](http://SocialLearningConnection.com)