



Permission to Use Photograph

Event: Prenatal Health Baby Brochure

Location: SMART Local 36 Welfare Fund

I grant to SMART Local 36 Welfare Fund the right to use photographs of me and/or my family in connection with the above-identified event.

I agree that SMART Local 36 Welfare Fund may use such photographs of me or my child without my name or the name of my child.

I have read and understand the above:

Signature of parent or guardian _____

Parent/guardian printed name _____

Name of Baby _____

Address _____

Date _____

If you would like for Sheet Metal Workers to use a picture of your child for our brochure, please email a picture to our nurse case manager mbcyliax@sheetmetal36.org along with this signed consent form.