

LSUA Children's Center
8100 Hwy 71 South
Alexandria, LA 71302

I give permission for pictures of my child with his/her schoolmates to be shared with the other children at our center. I understand that a CD is made for children when they leave the pre-k class as a keepsake from their time here at our center.

Child's name: _____

Parent: _____

Date: _____