

Facebook Permission Form

Dear CAOS Parents,

As you know, CAOS has a public Facebook page and a private Facebook group.

The **public page** is designed to communicate externally. First, it allows us to maintain our connection with former CAOS families by sharing events and experiences that current students are having at school. Only group photos will be shared on the public page. It also shares the mission and important elements of our program with prospective parents, professionals and donors who together ensure the future of our school.

The **private group** is intended for internal communication with families of current students. Both individual and group photos will be shared in the private group. This allows us to share more photos from different events and provide you with specific information and reminders, such as time and location of events like field trips and performances.

Based on some discussion with members of the PTO, we wanted to give families the opportunity to opt in or out of including their children's photos in Facebook posts. Please fill out the form to communicate your preference.

CAOS Staff

Child's Name:

I understand that Carle Auditory Oral School staff members take photographs during class, therapy, field trips and special events. I understand that these pictures may be posted on the public and/or private CAOS Facebook page following special events. I understand that child/ family member names are never included in the Facebook posts. Please initial to indicate your agreement with these statements. _____

Please carefully read the statements below and initial to indicate your agreement with each statement.

Yes, I grant permission for my child/family member's photos to be posted in:

_____ Group photos on the **public** CAOS Facebook page.

_____ Individual and group photos on the **private** CAOS Facebook group.

No, please do **not** post my child/family member's photos on the **public** CAOS Facebook page and the **private** CAOS Facebook group.

_____ No, I do not authorize

Parent/Guardian Signature:	Date Signed:
Relationship to Child/Authorization to Sign:	