

## Tapestry Registration and Consent

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I have read the information about the TAPESTRY system and understand that by signing this consent form I will receive an email message and will be able to log in and see observations of my child. These observations may include photographs, video clips or audio recordings.

I hereby give consent for my child to be photographed/videoed for record- keeping purposes and for the use of Early Years Professionals at Kids Corner Nursery.

I understand that there may be group photographs/videos that incorporate images of my child and other children and teachers. I agree that these photographs/videos may be used in other children's learning journeys. To protect and respect privacy, I agree not to use/upload/share the photographs, videos and audio recordings involving other children on public web-sites such as social media websites and may not utilise information from my child's learning journey for purposes other than understanding the development of my child.

**KIDS CORNER NURSERY** policy on photographs/videos covers this in more detail, which I can access in the Policies Folder located at office. I agree that my child's observations, learning journey, reports and other documents created through Tapestry can be stored on Tapestry systems. I agree to log in using only the personal log-in provided to me. The following email address(es) can be used to send me notifications through the tapestry system.

Parent /carer First & Last name	Your e-mail address	Relationship to the child	Your Signature

DATE.....