PINHOLE PHOTOGRAPHY PERMISSION FORM

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Date _____Hour_____Name _____

Name _____

ATTENTION: THIS PAPER MUST BE SUBMITTED WITH YOUR PROJECT WHEN IT IS HANDED IN.

DESCRIPTION OF PROJECT

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I (we) the undersigned, hereby acknowledge the dangers involved with using photographic chemicals and agree to read and abide by the precautionary statements printed on the chemical packaging. We agree to supervise the use of the chemicals used for this project in order to prevent harm to individuals that will have access to the area where the chemicals are being used or stored. We will make sure that the chemicals will be used with adequate ventilation and that safety goggles, waterproof aprons, and rubber gloves will be worn by anyone handling the chemicals. We will make sure that the chemicals are never within reach of small children or other individuals that do not understand the hazardous nature of the chemicals.

_____ _____ _____ _____

Parent's Signature Date Parent's Signature Date

_____ _____

Parent's Signature Date