



**Photo Release Form**

I grant to the Little Compton Makers, Inc., its representatives and employees the right to take photographs of my child(ren) and property in connection with the above-identified subject. I authorize the Little Compton Makers, Inc., its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that the Little Compton Makers, Inc. may use such photographs of my child(ren) with or without his/her name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Signature, parent or guardian (if under age 18) \_\_\_\_\_

Printed Name, parent or guardian (if under age 18) \_\_\_\_\_

Name(s) of Child(ren)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Check here if you decline Photo Release.