



ARIZONA ARTS ACADEMY

**Arizona Arts Academy Use of Likeness
Agreement**

Permanent Permission Form

I agree to allow the likeness of any of our family members, to be used by Arizona Arts Academy in yearbook, newsletter, PowerPoint, video, website, presentations, and any other need that may arise.

I have read the above list of items and I agree fully to participate in and support them.

Student's Name: _____

Parent or Guardian Signature: _____

Date: _____