

Photograph & Video Release Form

Child's Name (Last, First):

I hereby grant permission to the rights of my child's image, likenes audio or video tape without payment or any other consideration. I use copied, exhibited, published or distributed and waive the right to in wherein their likeness appears. Additionally, I waive any right to rerelated to the use of my child's image or recording. I also understandiverse educational settings within an unrestricted geographic area.	understand that their image may be edited, spect or approve the finished product by alties or other compensation arising or nd that this material may be used in
Photographic, audio or video recordings may be used for the follow informational presentations classroom bulletin boards school website promotional and marketing material	
I will be consulted about the use of the photographs or video record listed above.	ling for any purpose other than those
There is no time limit on the validity of this release nor is there any materials may be distributed.	geographic limitation on where these
By signing this form I acknowledge that I have completely read and agree to be bound thereby. I hereby release any and all claims again this material for educational purposes.	
Parent's Name:	-
Parent's Signature:	Date