## **JEANNETTE FROMM ART**

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Website: www.jeannettefromm.com

2025	CTLIDENT	CONSENT	/ DEI	EVCE	
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Student's Name:	
Address:	
	Zip:
Cell Phone:	Email Address:
MEDIA AND PHOTO CON	SENT:
to be used for promoti photos, and she reque	y on occasion take photos in class of students working on their art ng her art classes. Jeannette does NOT use student names with ests student's consent for photo usage. Students are asked to ne following paragraph.
be used for local news class photos of mysel	eannette Fromm to use class photos of myself and my artwork, to s and marketing. I also give permission to Jeannette Fromm to use and my artwork to be used for marketing on social media, art website, Facebook, and Instagram.
Check appropriate a	nswer: YES NO
Student's Signature: _	Date
I understand that <i>Jear</i> provide safe, healthy follow directions for all participating in any articipating	ART ACTIVITIES AND ASSUMPTION OF THE RISK:  nnette Fromm takes all possible precautions to reduce risk and and enjoyable art class experiences. I warrant that I am able to activities in the studio/class. I understand and agree that in class or workshop, there is a possibility of physical injury or ree, therefore, to assume all risks and responsibility for any such ch might occur to me during any art classes, workshops or
Student's Signature: _	Date
damage or loss of inst from all liability incurre	OF LIABILITY:  old Jeannette Fromm liable for any personal injury, property urance. I agree to release and hold harmless Jeannette Fromm ed as a result of my participation in her art studio classes, es, and that these terms serve as a release for volunteers,
property owners, and	members of Jeannette's family.
Student's Signature	Data