

Photo Permission Form

Hands that help
Minds that learn
Communities that benefit!

I hereby authorize _____ to use any photographs, in which my child or minor under my care is involved. These photos may be used for lawful distribution and dissemination to the public.

I hereby release and discharge _____ from any and all claims arising out of the use of these photos, or any right that I, or the minor under my legal care, may have to the photos or their use.

I _____ am of full age, and am able to contract for the minor in the above regard. I have read this document and fully understand its contents.

Name of Minor: _____

Address of Minor: _____

Name of Adult: _____

Address of Adult: _____

Relation to Minor: _____

Signature of Adult: _____

Date: _____

