

PHOTOGRAPH RELEASE

I grant permission to _____ and its employees to use photographs taken of my family (names listed below), taken at school or school-related events, in any of the publications or recruiting materials used by the school (listed above) and/or the Early Learning Coalition of Northwest Florida, Inc. This includes, but is not limited to, newsletters, display boards, brochures, and electronic media (i.e., website and social media).

I hereby hold harmless the organizations (listed above) and any firm publishing/distributing the finished product containing photographs taken of my family while at school or a school-related event.

I am 18 years of age or older, and I am competent to contract in my own name. I have read this release before signing below, and I fully understand the contents, meaning, and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing. I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms to this release.

This "Photograph Release" will not expire unless requested by the signed party (below).

Signature (over 18 years of age)

Date

Printed Name (of signed party over 18)

Names of Family Members Guaranteed Under this Release:

