

MINOR (CHILD) PHOTO RELEASE FORM

| , the parent or legal guardian of | | |
|---|-------------------------|-------------------|
| [Child | | |
| [Party Receiving Permission] my permission | on to use the photograp | hs described as |
| including but not limited to: publicity, copyr web content. | | |
| Furthermore, I understand that no royalty, payable to me by reason of such use. | fee or other compensat | tion shall become |
| Parent/Guardian's Signature: | | Date |
| Parent/Guardian's Name: | | |
| Child's Name: | | |
| Phone Number: | | |