Photo Release Form

Standard Photo Release Form

I hereby give my consent for the (Your library) to use my photograph and likeness to be used in its publications, including its website. I release them from any expectation of confidentiality for the undersigned minor children and myself and attest that I am the parent or legal guardian of the children listed below.

Parent Signature: _________________________________ Date: ___________

Library: _______________________________________

Names and Ages of Minor Children:

Name: __________________________ Age: _____
Name: __________________________ Age: _____
Name: __________________________ Age: _____
Name: __________________________ Age: _____
Name: __________________________ Age: _____
Name: __________________________ Age: _____
