

CONNECTICUT FARMS SCHOOL

2013 – 2014 PHOTOGRAPHIC RELEASE APPROVAL

____ I grant permission to publish the image and/or voice of the child named below as recorded for any artistic purpose. I also grant permission to use my child's name in any news release. I grant these permissions freely and without reservation.

NAME OF CHILD: _____

ADDRESS: _____

PARENT/GUARDIAN SIGNATURE: _____

TEACHER/GRADE _____

DATE: _____

____ I do not grant permission to publish the image and/or voice of the child named as recorded for any artistic purpose. I do not grant my permission to use my child's name in any news release.

PARENT/GUARDIAN SIGNATURE: _____

NAME OF CHILD: _____