

## RELEASE FOR SCHOOL PRODUCTION

Parents/Guardians: Please complete this form since your child's photograph or video image will be used in a school produced public-relations document.

STUDENT'S NAME:	DATE: 2019-20
SCHOOL NAME: <b>St. Anthony School &amp; Preschool</b>	
PROJECT TITLE: <b>Yearbook, Graduation Video, School Scrapbook, Photo Album, DVD/Video Productions, Newspapers, Web Page</b>	

I hereby grant the above named school (hereinafter called PRODUCER), their nominees, designees, and successors full authorization and the absolute right and permission to sell, assign, convey, reproduce, copyright, use or publish photographic reproductions, portraits, or pictures of me, motion picture or video tape pictures of me, or in which I may be included in whole, in part, or in composite, or in which character or form is distorted, in conjunction with my own or any other picture, product, person, name or reproduction, in color or otherwise, made through any media at its studios or elsewhere, for art, advertising, commerce, business or trade, or any other lawful purpose whatsoever.

I hereby waive any right I may have to inspect or approve the finished product or the advertising copy that may be used in connection therewith, or the use to which it may be applied.

I hereby release, discharge and agree to hold harmless PRODUCER, its nominees, designees, successors, and assignees or others for whom they are acting from any liability of any nature or description by virtue of any use whatsoever, whether intentional or otherwise, or from any change that may occur or be produced in the taking of said picture or pictures, or any processing tending towards the completion of the finished product, unless it can be shown that said use or change is solely for its purpose of subjecting me to conspicuous ridicule, scandal, reproach, scorn and indignity.

STUDENT'S SIGNATURE:
ADDRESS:
PHONE:
SIGNATURE OF WITNESS:

## RELEASE FOR A MINOR

If the student is under 21 years of age, the parent or legal guardian of the model must sign below.

I, parent and/or legal guardian of the above named student, do hereby consent and grant my permission to all of the forgoing.

SIGNATURE OF PARENT OR GUARDIAN:
SIGNATURE OF WITNESS: