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PHOTOGRAPHY RELEASE

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I,, (Print Parent/Guardian's Full Name) am the parent or guardian of:	I,, (Print Full Name) am an adult 18 years of age or older.
(Print Name of Minor Child)	(Print Title)
(Print Name of Child's School)	(Print School or Organization Name)
I hereby grant and assign the California State PTA, its units, councils, districts and legal representatives, the irrevocable and unrestricted right to use and publish for editorial, trade, advertising or any other purpose and in any manner and medium, including website and internet promotion, all photographic, video, and digital images as indicated below:	
☐ PHOTO / IMAGE ONLY of my child.	☐ PHOTO / IMAGE ONLY of myself.
PHOTO / IMAGE ONLY of my child with SCHOOL NAME.	PHOTO / IMAGE ONLY of myself with SCHOOL NAME or ORGANIZATION.
PHOTO / IMAGE of my child with my CHILD'S NAME, and my child's SCHOOL'S NAME.	PHOTO / IMAGE of myself with my NAME, my ORGANIZATION, and/or my TITLE.
By signing this, I hereby release the California State PTA, its units, councils, districts and its legal representatives from all claims and liability relating to said photographs, video and digital images.	
Date:	
Parent/Guardian/Adult Signature:	
Print Name as Signed:	
Address, City, Zip:	
Telephone: Er	nail:
LEE PTA by September 16, 2016	