



Photo Release Agreement

We are asking your permission for a photo release of your child to be used in various publications including but not limited to Colonial newsletters, area newspapers, marketing materials and videos.

Signing this release will allow us to use your child's picture without further consent.

I give Colonial Schools permission to use my child's photo.
Parent's Signature _____
Child's Name _____
Date _____ Child's Class _____

I do not give Colonial Schools permission to use my
child's photo.
Parent's Signature _____
Child's Name _____

OVER

