

Photograph & Video Release Form

I hereby grant **Zion Lutheran Preschool** permission to the rights of my child's image, likeness and sound of his/her voice as recorded in photographs and/or on audio or video tape without payment or any other consideration. I understand that the image may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product wherein the likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the image or recording. I also understand that this material may be used in diverse educational settings within an unrestricted geographic area.

Photographic, audio or video recording may be used for the following purposes:

- Conference presentations
- Educational presentations or courses
- Informational presentations
- Facebook/ school website
- School marketing materials

By signing this release I understand this permission signifies that photographic or video recordings of my child may be electronically displayed via the Internet or in other media.

There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed.

By signing this form I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release any and all claims against any person or organization utilizing this material for educational purposes.

I _____ do or _____ do not consent (**check one**) for my child's photograph/ recordings to be used.

Child's Full Name _____

Teacher's Name _____

Parent Signature _____ Date _____