

20____ - 20____

PHOTOGRAPHIC & CAMERA WAIVER

Permission is hereby granted to CLASS Academy and The Prevention Network to use photographs of my child: _____ (Print Student's Name), to assist in its community awareness, educational efforts and related publicity purposes.

It is hereby stipulated and agreed that such use of said photographs will not violate the rights of the named individual, his/her legal representatives, nor his/her respective heirs, and I do hereby indemnify and hold harmless any agent or representative of CLASS Academy and The Prevention Network from any and all claims, demands and/or causes of action of whatever kind nature for their actions taken pursuant to this authority.

Further, it is hereby stipulated and agreed that CLASS Academy and The Prevention Network and its agents and/or representative will not incur any liability for payment to any person or organization as a result of the stated use of the aforesaid photographs of the named individual. It is also understood that my son or daughter will be filmed during their entire school day at CLASS Academy. All students' activities are monitored and recorded throughout the building. I understand that this footage can be used at any time as needed by CLASS Academy or local law enforcement.

In addition, it is hereby stated and agreed that no image created of said individual will be sold to a third party for any purpose or use whatsoever and it is also stated and agreed that the resulting images may be used by the creating photographer for his/her own publicity and marketing in print portfolio form only.

PLEASE SIGN BELOW:

PARENT SIGNATURE: _____ DATE: ____/____/20____

PRINT NAME: _____

STUDENT SIGNATURE: _____ DATE: ____/____/20____

PRINT NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____