PHOTOGRAPHY RELEASE

____ Yes. I, the undersigned, do hereby give permission to Meredith College to take photographic images, video or audio recordings (“Photos”) of ____________________________ (child’s name) on ____________________ (date) in ____________________ (class). I understand and agree that such Photos will be the property of the College and may be used, displayed, published, and adapted by the College and its authorized agents for publications and presentations online and in other media for the College’s educational purposes and to promote the College and its programs; provided that, the College will not identify the child as a subject of the Photos by name under any circumstances. I understand and agree that I have voluntarily given this Photography Release to the College and will not have a right to inspect or approve the College’s use of the Photos, and that neither the child or me will receive any payment or remuneration for the Photos or for allowing the Photos to be taken.

Signature: ____________________________ Date: ____________________________

Please print the following information:

Name: ____________________________

Relation to Child: ____________________________

Contact Phone Number: ____________________________

____ No. I do not give permission to Meredith College to take Photos of ____________________________ (child’s name).

Signature: ____________________________ Date: ____________________________

Meredith College, 3800 Hillsborough Street, Raleigh, NC 27607

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