

Photo Release

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**If this release is being signed for a child/ward**, I certify that I am the parent/guardian authorized to sign this release.

Name of Child/Ward: (PRINT)

Name of Parent/Guardian: (PRINT)

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

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