



**PHOTO/VIDEO RELEASE FORM**

I, \_\_\_\_\_ (please print), grant permission to St. Mark Lutheran Preschool & Childcare Center (SMLPSCC) and its agents and employees the irrevocable and unrestricted right to reproduce the photographs and/or video images taken of me, or members of my family, for the purpose of publication, promotion, illustration, advertising, or trade, in any manner or in any medium and without restriction. I hereby release SMLPSCC and its legal representatives for all claims and liability relating to said images or video. I also waive my right to any compensation.

**Please list all persons to which this release is applicable:**

**Parent 1:** \_\_\_\_\_

**Parent 2:** \_\_\_\_\_

**Children:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Others:** \_\_\_\_\_

\_\_\_\_\_

**Name/Legal Guardian:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

