



PHOTOGRAPHY RELEASE FORM

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I hereby consent to the use of these photographs of my child/dependent/self, and/or any copies of this photograph in any editorial and/or promotional material produced and/or published by WRDC.

I agree that these photographs will be the exclusive property of WRDC and that all reproduction rights are handed over to WRDC to use the photos in any medium in perpetuity.

I understand that signing this release does not guarantee publication of the photo.

I understand that there will be no compensation or remuneration for the use of the photo.

The photographs will be included in the WRDC stock photography catalogue.

It is the WRDC's policy that students in photographs are not identified by name. Students over the age of 18 may sign for themselves; students under 18 must have this release signed by their parent or guardian.

AGREED TO AND ACCEPTED BY:

NAME (STUDENT): SIGNATURE (STUDENT): DATE:

NAME (ADULT OR PARENT/GUARDIAN): SIGNATURE (ADULT OR PARENT/GUARDIAN): DATE:

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