



# MINOR (CHILD) PHOTO AND VIDEO RELEASE FORM

For youth under 18 years of age

I, \_\_\_\_\_, the parent or legal guardian of

\_\_\_\_\_ (full name/s of minors)

grant the **Arthur Agricultural Society** my permission to use the photographs and/or video described as \_\_\_\_\_ [Describe Photographs/video] for any legal use, including but not limited to: publicity, illustration, advertising, and web content.

Furthermore, I understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

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

Parent/Guardian Name (print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Minor/s Full Name/s: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Home Address: \_\_\_\_\_

