



Photography Release Agreement

Name(s):

Cell Phone:

Email:

I/We hereby give Community Action Team, its successors or assigns, the right to reproduce in any of its printed and online publications (such as newsletters, annual reports, websites, and posts) and on social media platforms all pictures that it has produced of myself and/or my child(ren). I understand that the agency will not use any personal information with the picture/video such as name, age, or location. I also understand that I will not receive any compensation for the use of the pictures/videos. The duration of use is at the discretion of Community Action Team Inc., and they are authorized to use all such pictures and duplicates thereof for publicity purposes and dispose of them as they see fit.

Signature (Parental signature if a minor)

Date