

Photo and Video Release Form for Minors (if under 18)

The Exclusives Academy has my permission to use my or my child's photograph and/or video publically to promote the organization. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee, or other compensation shall become payable to me by reason of such use

Parent/Guardian's signature: _____

Date: _____

Parent/Guardian's Name: _____

Child's Name: _____

Phone number: _____

Photo and Video Release Form for Adults

The Exclusives Academy has my permission to use my photograph and/or video publically to promote the organization. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee, or other compensation shall become payable to me by reason of such use.

Signature: _____

Date _____

Name: _____

Phone Number: _____