

Photo Release

July 1, 2009 – June 30, 2010

Child's Name _____

In the event that the Coshocton County Board of DD desires to use a photograph, still or motion picture, or audio/video recording, of said child in connection with activities, promotion or publicity of Coshocton County Board of DD, permission is hereby granted without further consent.

Signature of Parent/Guardian/Individual

Date

Yearbook Release

_____ Yes, I give consent to use my child's photograph, enrollee's photograph in the 2009–2010 Year Book.

Signature of Parent/Guardian/Individual

Date

_____ No, I do not give consent to use my child's name and photograph in the 2009–2010 Year Book.

Signature of Parent/Guardian/Individual

Date