PHOTO/IMAGE/ESSAY RELEASE for Cornwall Child Center

I hereby consent and authorize the use, by Cornwall Child Center in West Cornwall, CT or its agents, or anyone authorized by you, of any and all photographs, videos, or testimonial that you have been produced or obtained during center enrollment, on site or off site, for any purpose, specifically for marketing and fundraising directly or indirectly, *that supports the objective and purpose of the Cornwall Child Center*.

i hereby declare it to be irrevocable and i hereby	release and discharge the Cornwall Child
Center in West Cornwall, CT, or its agents, from	any and all claims whatsoever in connection
with the use of my child ()'s photographs, videos, or
testimonials and the reproduction of any photogr	aphs, videos, and/or testimonials in any media
and communication format, that supports the obj	ective and purpose of the Cornwall Child
Center, directly or indirectly.	
Child's Name:	-
Parent Signature:	
Date://	
Witnessed By:	_
Signature of	
Witness:	Date://
Address:	
_	
City, State,	
Zip:	

This release remains in effect unless replaced by a specific written, signed, dated, and witnessed document revoking the above consent.