



# Model Release

Form # 3

## **TO BE COMPLETED BY PARENT/GUARDIAN**

I, grant permission to Washington Academy, Inc to use my image (photographs and/or video) for us in Washington Academy's publications including videos, email blasts, recruiting brochures, newsletters and magazines and to use my image in electronic versions of the same publications or on the Washington Academy website or other electronic forms of media.

I hereby waive any right to inspect or approve the finished photographs or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the image.

Please Check the paragraph below that is applicable to your situation:

\_\_\_\_\_ I am 18 years or older and I am competent to contract my own name. I have read this release before signing below and I fully understand the contents, meaning and impact of this release. I further understand that I am free to address any specific questions with regard to this release in writing prior to signing and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

\_\_\_\_\_ I am the parent or legal guardian of the below named child. I have read this release before signing below and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

Use of photos or video of your child shall maintain confidentiality of their full name and or address, unless express written consent has been granted by parent/guardian or student, who has reached the legal age of majority (18).

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

Name: (please print) \_\_\_\_\_

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

Signature: \_\_\_\_\_

Signature of parent or legal guardian (if under 18 years of age):  
\_\_\_\_\_