## PHOTO RELEASE FORM

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| Student Name (print full name)            | - 19 AND - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - |   |
|---|--|---|
| Relationship to student                   |  |   |
| Print Name                                |  |   |
| Signature                                 | Date   |   |
| No, I do not wish for child to be photogr | aph.   | · |