



MINOR PHOTOGRAPHY RELEASE FORM

I, _____, the parent or legal guardian of minor
_____, grant Freedom4U my permission for any
photograph submitted to the annual Freedom4U Photography Contest, including those with
my minors image, to be used for any legal purpose, including but not limited to: publicity,
copyright purposes, illustration, advertising, and web content. Furthermore, I understand
that no royalty, fee or other compensation shall become payable to me by reason of such
use.

Parent/Guardian Signature: _____ Date: _____

Phone Number: _____

Send to: Freedom4U

email: admin@freedomcommunity.com

Fax: 310-378-3024

Mail: 336 Tejon Place, PVE, CA 90274

Phone: 800-501-9801