

PHOTO RELEASE FORM FOR MINOR S (under age 18)

Middle Georgia State University enjoys telling the good stories about

We often shoot photographs at these events that occur on our campuses. events and use them on social media. Occasionally , local news media will attend these events and take photos. We respect the privacy of our guests, so we ask for your acknowledgement that photos may be taken of your child and that we have your permission to use them for these purposes. Name of Event: Date(s): _____ I attest that I am the parent o r legal guardian of the minor listed below. Print Name of Parent/ Guardian: Signature: D ate: Street Address :_____ City, State and Zip:_____ Names and Ages of Minors Attending the Event : Name: _____ Age: _____ Name: _____ Age: _____ Name: Age: _____I prefer my ch ild not be included i