



Image & Artwork Release

I, _____, hereby authorize and consent to the use of images of my child and/or their artwork by Arts Every Day for appropriate purposes, including but not limited to: still photography, videotape, electronic and print publications, and website. I give this consent with no claim for payment.

Artist Name:

Phone Number (in case we need to contact you):

Teacher Name:

Teacher Email and Phone Number:

School Name:

Signature (Parent or Guardian if under 18):

_____ Date _____

