



PHOTO RELEASE FOR VERITY'S VILLAGE

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

- I authorize the use of the photos I have provided to Verity's Village for display on the Verity's Village website, social media, and in related Verity's Village materials and publications.
- I authorize the use the photos I have provided to Verity's Village for display on the Verity's Village blog and social media only.
- Other: \_\_\_\_\_

(If pictures include your child, please fill out the next three lines)

Child's name : \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Child's birth date : \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Parent / Guardian's name (print): \_\_\_\_\_

Parent / Guardian signature: \_\_\_\_\_

Date rec. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_