



WHATCOM
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FOUNDATION

Photo Release

Event/Program: _____

Location: _____

I hereby grant Whatcom Community Foundation permission to use my likeness in a photograph, from the above referenced event/program/place, in any of its publications, including but not limited to print and digital materials.

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Child Name/Adult Name
(the person in photo)

Parent/Guardian Name
(if person in photo is under 18)

Signature/Date
(parent/adult)

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