



PHOTOGRAPHIC RELEASE FORM

I give to the Skokie Northshore Sculpture Park, a 501(c)(3) non-profit corporation, its designees, agents and assigns, unlimited permission to use, publish and republish in any form or media, photographic images of my dependent child taken at (School name & date of events) without identification of the child by name.

Name of student		Age
Street address	City, State, Zip	
Signature of parent or legal guardian		Date
Print name	Relationship	
Telephone Number	e-mail address	

Please return this form to your child's school

If you have any questions about this form, you may contact the photographer and board member, Gerry Holmes, at (847) 982-0572, or at gerryh@comcast.net.

All signed and returned forms will be retained by your school. Only verbal or electronic notice of approval will be passed to the Skokie Northshore Sculpture Park. Neither your name, nor your student's name, address nor other information will be conveyed to the Skokie Northshore Sculpture Park.