



Colorado
Photographic
Arts Center

Parent/Guardian Model Release for Teen

Please turn this into the instructor on the first day. This form is optional.

I hereby consent that the photographs taken at **CPAC's Teen Summer Camps – CLASS**, may be used by the Colorado Photographic Art Center; for the purpose of advertising, grant proposals, social media, or publications to promote the gallery. I further agree that the images can be used without additional compensation to the undersigned. I also declare that I have legal authority to grant these permissions and I accept all responsibilities for such.

I have read the foregoing and fully understand the contents hereof. I represent that I am the parent/guardian of the below named model. For value received, I hereby consent to the foregoing on his/her behalf.

The Model's signature is testament to understanding and acceptance of this Release Form.

PLEASE PRINT NEATLY!

Teen's Name

Parent/Guardian's Signature

Date

Mailing Address

Phone #

Email Address

Teen's Date of Birth