



CENTRAL COUNTY FIRE DEPARTMENT

Minor Photo Release Form

1) I, _____ the parent or legal guardian of _____ (Child), hereby authorize the Central County Fire Department (CCFD) my permission to use the photographs taken with Central County Firefighters for any use, including but not limited to: publicity, copyright purposes, illustration, advertising, and web content. (herein referred to as photographic or electronic reproductions).

2) I authorize the use of any such photographic or electronic reproductions for any purpose, including, but not limited to educational and other public media as may be deemed appropriate by CCFD (I understand that my child may be identifiable from such photographic or electronic reproductions.)

Furthermore, I understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Parent/Guardian's Signature: _____ Date _____

Parent/Guardian's Name: _____

Child's Name: _____

Phone Number: _____