

THE BLUE MARBLE ACADEMY

PHOTO RELEASE FORM

The Blue Marble Academy
2163 King Rd, King City, ON L7B 1G3

PERMISSION TO USE PHOTOGRAPH



**THE
BLUE
MARBLE
ACADEMY**

PHOTO RELEASE WAIVER

Student Name:

I, _____, hereby grant The Blue Marble Academy and its representatives the irrevocable and unrestricted right to use and publish photographs and/or video recordings of my child, taken by The Blue Marble Academy or its employees, for the purpose of social media, website and promotional materials.

Opt-in

Opt-out

Parent Signature:

Date Signed:

I, the undersigned, have read and fully understood the terms and conditions of signing this photo release waiver.