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## SANGEA ACADEMY PHOTO RELEASE FORM

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**CHILD'S NAME:**

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**AGE:**

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**PARENT/GUARDIAN'S NAME:**

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Sangea Academy has my permission to use my child's photograph and/or video publically for promotional purposes. I understand that the images may be used in print publications, online publications, presentations, websites and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

**PARENT/GUARDIAN'S SIGNATURE:**

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**DATE:**

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