

# Kids That Care Club Photo Release Form

Kids That Care Club

1042 Lewis St.  
Santa Clara, CA 95050

Date:

Event:

Location:

I grant to Kids That Care Club, its representatives and staff the right to take photographs of me and my property in connection with the above-identified event. I authorize Kids That Care Club, its assigns and transferees may use such photographs of me, with, or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

We

I agree that Kids That Care Club

I have read and understand the above:

Signature \_\_\_\_\_

Printed name \_\_\_\_\_

Date \_\_\_\_\_

Signature, parent or guardian \_\_\_\_\_

(if under age 18)