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USDA Child & Adult Care Food Program Sponsor

CHILD PHOTOGRAPH RELEASE FORM

I do hereby grant permission to Child Nutrition, Inc., its agents, and others working under its authority, full and free use of photographs containing my child's image/likeness. I understand these images may be used for promotional news, and/or educational purposes.

I hereby release, discharge, and hold harmless Child Nutrition, Inc. and its agents from any and all claims, demands, or causes of action that I may hereafter have by reason of anything contained in the photographs.

I do further certify that I am either of legal age, or possess full legal capacity to execute the foregoing authorization and release. If the picture is of a minor, 17 years of age or younger, the signature of a parent or legal guardian is required.

Child's Name (Please Print)	
Legal Guardian's Name (Please	e Print)
Legal Guardian's Signature	
Date	-
Child Care Provider's Name:	