

PHOTO RELEASE FORM

I hereby grant Fabulous Moments permission to use my likeness in photographs(s)/video in any and all of its publications in any and all other media, whether now known or hereafter existing, controlled by Fabulous Moments, in perpetuity, and for other use by Fabulous Moments including but not limited to use in promotional/marketing materials for the purpose of publicizing Fabulous Moments programs, or for any other lawful purpose, without payment or any other compensation.

I hereby hold harmless and release and forever discharge Fabulous Moments from any claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I am 18 years of age and therefore competent to contract in my own name. By signing below, I acknowledge that I have read and understand the contents of this release.

(Signature)

(Date)

(Printed Name)

(Date)

If the person signing is under 18 years old, there must be consent by a parent or guardian, as follows:

I hereby certify that I am the parent or guardian of _____, named above, and do hereby give my consent without reservation to the foregoing on the behalf of this person.

(Parent/Guardian's Signature)

(Date)

(Parent/Guardian's Printed Name)

(Date)