



# **ALTRUSA INTERNATIONAL, INC.**

## **PHOTO/VIDEO RELEASE FORM FOR A MINOR**

I, (parent's name, please print) \_\_\_\_\_, give Altrusa International, Inc., (Altrusa) the absolute right and permission to use photographs of my minor child, \_\_\_\_\_, in its promotional materials and publicity efforts.

I understand that the photograph(s) may be used in a publication, print ad, electronic media (e.g. video, CD-ROM, Internet, World Wide Web), or other form of promotion.

I acknowledge that Altrusa owns the photograph. I acknowledge Altrusa's right to crop or treat the photograph in its discretion. I also acknowledge that Altrusa may choose not to use the photograph at this time, but may do so at its own discretion at a later date.

I waive any right to compensation arising from or related to the use of the photograph.

\_\_\_\_\_  
Name of Child (Please Print Clearly)

\_\_\_\_\_  
Name of Legal Guardian or Parent (Please Print Clearly)

\_\_\_\_\_  
Signature of Legal Guardian or Parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number and/or E-mail Address (Please Print Clearly)

*Please forward completed form to:*  
Altrusa International, Inc.  
Attn: Membership  
332 South Michigan Avenue, Suite 1123  
Chicago, IL 60604-4410  
Tele: (312) 427-4410  
Fax: (312) 427-8521  
E-mail: [altrusa@altrusa.org](mailto:altrusa@altrusa.org)