

**SPRINGFIELD SDA JUNIOR
ACADEMY**

IMAGE RELEASE FORM

For value received, I hereby consent and authorize the Springfield SDA Junior Academy or its designee, to use my name and/or the names of my family members who are minors, as listed below, as well as my likeness, photos, videos and other information (or that of family members who are minors) for the purpose of news releases, advertising, publicity, publication or distribution in any manner deemed appropriate by the school administration. I further consent to such use in their present form and to any changes, alterations, or additions thereto. I hereby release the Springfield SDA Junior Academy from all liability in connection with all such uses.

Dated this _____ day of _____,

Signed:

(Please **print** name)

(Please **sign** name)

Address:

Telephone Number:

Minor Family Members to whom the Release Applies (Please **print** name/s):

