

## Photo Release Form for Minors (if under 18)

The Children's Oral Health Institute has my permission to use my or my child's photograph publically to promote the importance of oral health education through the *Lessons in a Lunch Box: Health Teeth Essentials & Facts About Snacks*® program. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Parent/Guardian's signature:

\_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian's Name:

\_\_\_\_\_

Child's Name:

\_\_\_\_\_

Phone Number:

Email:

\_\_\_\_\_