

Photo Release Form

*Veterans of Foreign Wars Auxiliary National Organization
&/or Veterans of Foreign Wars Auxiliary # _____ (fill in number)*



Release for Youth:

I, _____, hereby authorize the use of my child's photograph for publication by VFW Auxiliary # _____ and/or VFW Auxiliary National Organization, including, but not limited to, social media sites, website, brochures, newsletters, e-newsletters, *VFW Auxiliary Magazine* and videos. Release must be signed by parent and VFW Auxiliary representative.

Please Note: National Auxiliary policy dictates that we do not share last names for students under school-aged or in grades K-8; the full names of students who are under 18 but in high school or college will be posted (if provided) unless otherwise specified.

Name of Child

Signature of Parent or Guardian

Date

Release for Adult:

I, _____, hereby authorize the use of my photograph for publication by VFW Auxiliary # _____ and/or VFW Auxiliary National Organization, including, but not limited to, social media sites, website, brochures, newsletters, e-newsletters, *VFW Auxiliary Magazine* and videos. Release must be signed by subject and VFW Auxiliary representative.

Signature

Date

VFW Auxiliary Representative

Date