

MONDAY YOUTH OUTING PROGRAMME

PHOTO RELEASE AUTHORISATION (UNDER 18)

Participant's name: _____

Address: _____

I hereby give authority for the City of Stirling to use my child's photograph on the understanding that it will be used in City of Stirling promotions.

Parent/Guardian's Name: _____

Signature: _____

Date: _____

OFFICE USE ONLY

Date: _____

Photographer: _____

Location: _____

Image description: _____

Image number: _____

City representative: _____