

Photo/Video Release Form for Minors

Me, undersigned : _____
(Full name of parent / guardian)

Born on ____ / ____ / _____, at _____,
Resident _____

As parent / legal guardian of the child:

(Name and surname of the child)

Born on ____ / ____ / _____, at _____,
Resident in _____

Give permission to SISSA to use pictures of the minor for the activities of the School.

I raise SISSA from any economic task and from all liability relating a misuse of personal data and photos from the users of the site or third parties.

With this release, SISSA is free from any direct or indirect liability concerning damage to my property or the image of my protected.

I have read this release and approve of its agreements, terms and conditions.

Date: ____ / ____ / _____

IN WITNESS:

(Signature legal guardian)

(firma tutore legale)