



PHOTO RELEASE FORM

I hereby grant the Alpha Phi Alpha Fraternity, Inc., and the Charles H. Wesley Education Foundation (our affiliated nonprofit organization) permission to use my child's likeness in a photograph in all its publications, including website entries, Twitter accounts (@DeKalbAlphas, @ExcelATL), Instagram (@DeKalbAlphas), Facebook and other social media without payment or any other compensation.

I understand and agree that these materials will become the property of Alpha Phi Alpha Fraternity, Inc. and will not be returned.

I hereby irrevocably authorize the fraternity to edit, alter, copy. Exhibit, publish or distribute this photo for purposes of publicizing the fraternity's programs or for any lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph.

I hereby hold harmless and release and forever discharge the fraternity from all claims, demands, and causes of action which, I my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have reason of this authorization.

I hereby certify that I am the parent or guardian of:



(CHILD'S NAME), named above, and do hereby give my consent without reservation to the foregoing on behalf of this person.

PLEASE RETURN TO THE YME/MX REGISTRATION DESK BEFORE THE END OF THE DAY.



Parent/Guardian's PRINTED NAME



Parent/Guardian's Signature



Date