



**Audubon Society
of Rhode Island**

Photo Release Form

I hereby authorize and give full consent to the Audubon Society of Rhode Island (ASRI) to publish and display photographs taken in which my child appears.

It is further agreed that ASRI may use these photographs in publications, brochures, leaflets, catalogs, advertising, the ASRI websites and used to promote ASRI programs and events to the press without limitation or reservation, or any compensation.

Child name: _____ Age: _____

Address: _____

Phone: _____

Event / Program Description: _____

Date: _____ Photographer: _____

Photo Description: (identify child by activity/program/clothing etc.)

Parent/Guardian Signature:
