

Parental/Guardian Photo Release Form

We (AFJROTC) are sending you this parental consent form to request permission to use your child's photo/image and name for US Air Force advertising purposes to include on social and other media.

Please check one of the following choices:

- I GRANT permission for my child's photos/images and name to be used for US Air Force advertising purposes to include on social and other media.
  
- I DO NOT GRANT permission for photos/images of my child to be used for US Air Force advertising purposes to include on social and other media.

Student's Name: (please Print) \_\_\_\_\_

Printed name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date: \_\_\_\_\_

The information herein is For Official Use Only (FOUO) information which must be protected under the Freedom of Information Act (5 U.S.C. § 522) and/or the Privacy Act of 1974 (5 U.S.C., §552a), as amended. Unauthorized disclosure or misuse of this PERSONAL INFORMATION may result in disciplinary action, criminal and/or civil penalties.