

**AFTERSCHOOL ALLIANCE PHOTO RELEASE**

I, \_\_\_\_\_ consent to the photographing,  
Student's Name

recording, video taping (digital or otherwise), and broadcast of my voice and likeness, performance and/or talents and any material as part of online promotion, television, film, radio, still photograph, CATV program (referred to below as the "Program").

I acknowledge that the Afterschool Alliance is the sole owner of all rights in and to the Program and photographs, video footage, and recording thereof, for all purposes and that they have the right, among other things, to broadcast the Program one or more times over any station or CATV system, or provide any other distribution of the Program.

I understand that I shall receive no compensation for my appearance and participation in the Program.

I understand that my name and likeness may be used in any legal manner for the internal or external promotional/informational activities of the Program, but not as an endorsement of any product.

Student's Signature: \_\_\_\_\_

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

Parent/Guardian

Signature: \_\_\_\_\_

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

**Please fax completed form to: Afterschool Alliance 646-943-8664  
Or email completed form to: challenge@afterschoolalliance.org**