**PHOTO RELEASE FORM**

Please carefully read and consider the terms of this Agreement. Sign in the space at the end to indicate your understanding and acceptance of such terms and your entry into the Agreement on behalf of yourself and your child. 1. In consideration of my child’s presence and attendance at and participation in the CraftingEducation Academy Clubs/Camps and all associated activities and outings, I, individually and on behalf of my child, hereby enter into this agreement and accept all of its terms. I represent and agree that I have the legal capacity and authority to act for and on behalf of my child/ward.

I do hereby on my own behalf and/or on behalf of my child grant CraftingEducation Academy, its parent, all subsidiaries, related and affiliated entities including, but not limited to, and all their officers, directors, members, partners, shareholders, employees, agents, insurers, successors and assigns (the “Released Parties”) the irrevocable right and permission to photograph or otherwise record me or my child in connection with the Club/Camp, and to use the photograph or recording (“Photograph”) for all purposes, including advertising and promotional purposes, in any manner in any and all media now or hereafter known, in perpetuity throughout the world, without restriction as to alteration. I waive any right to inspect or approve the use of the Photograph, and acknowledge and agree that the rights granted by this Release are without compensation of any kind. I acknowledge and agree that I have no right, title or interest in the Photographs and agree that such Photographs and the copyright therein are the exclusive property of the Released Parties. I, individually and on behalf of my child, agree to release and discharge the Released Parties from any claims, actions, damages, demands, costs, expenses (including attorneys’ fees) or lawsuits of any kind by reason of the sale, distribution or use of such photographs or recordings.

I agree that this Release shall be binding upon me and my child/ward’s family members, heirs, assigns, personal representatives and all other parties

I AM OF AT LEAST 18 YEARS OF AGE, AM OF SOUND MIND, HAVE READ AND UNDERSTAND THIS AGREEMENT AND ACCEPT AND VOLUNTARILY AGREE TO ITS TERMS.

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

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

Printed Name of Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_