



1 Franklin St.
Catskill, NY 12414
(518) 943 - 4230
(518) 943 - 1439
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PHOTO RELEASE FORM FOR MINORS

Today's Date: _____

This permission may also be obtained via the website, sign-up forms, or email.

I, _____, the parent or legal guardian
(Print Name)

of the child/children named below, grant the Catskill Public Library and Palenville Branch Library my permission to use photographs and/or video of my minor child/children taken during programs or events held by or at the library, in publications, news releases, web content, and in other communications related to the Mission of the Library.

Furthermore, I understand that no royalty, fee, or other compensation shall become payable to me by reason of such use.

This permission shall remain in effect unless revoked, in writing, by me or until the minor child becomes of age.

Parent/Guardian Signature: _____

Address: _____

Best # to call: _____

Email Address (optional): _____

Please indicate: (use back if necessary)

Child's name: _____

Child's date of birth: _____

Child's name: _____

Child's date of birth: _____

Resolution: Adopted on August 16, 2023, by unanimous vote of the Board of Trustees of the Catskill Public Library