## PHOTO/FILM/VIDEO CONSENT AND RELEASE

I hereby give permission for images of my child or myself (as applicable), captured during Technology Student Association (TSA) activities through video/film, photo or digital camera, to be used solely for the purposes of TSA promotional materials and publications, and I waive any rights of compensation or ownership thereto.

Name of minor in images (please print)	
Patricia Sosa-Killians	
Name of minor's parent/guardian (please print)	
Name of adult in images (please print)	
Parent/guardian or adult's signature (as applicable)	

Date