



**Lake Pontchartrain Basin Foundation  
Photo Release Form**

I/we, \_\_\_\_\_, the undersigned parent(s)/guardian(s) of \_\_\_\_\_, hereby grant permission to Lake Pontchartrain Basin Foundation and the New Canal Lighthouse, its representatives, and employees to take photographs of my child in connection with the provided educational programs.

I authorize LPBF, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that LPBF may use such photographs of my child and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.

I hereby further release, indemnify, and hold harmless Lake Pontchartrain Basin Foundation and New Canal Lighthouse, their directors, employees, and insurers from any and all claims and/or damages on behalf of us and/or my/our child arising from the publication of my/our child's photograph, videotape and/or film on LPBF's website or publications.

I have read and understand the above:

\_\_\_\_\_  
Father's Signature

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Father (print name)

\_\_\_\_\_  
Mother (print name)

School/Organization: \_\_\_\_\_

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

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