

**PARENTAL CONSENT AND RELEASE**

Minor's Name: \_\_\_\_\_

I warrant and represent that I am the parent and/or legal guardian of the MINOR whose name appears above ("MINOR").

I hereby authorize and give consent to TEMPLE JUDEA OF MANHASSET ("TEMPLE JUDEA") for my MINOR son/daughter \_\_\_\_\_ to participate in the program or event entitled \_\_\_\_\_.

I consent to the release granted to TEMPLE JUDEA by the MINOR and join in and confirm the rights and consents granted by the MINOR, including, but not limited to, the MINOR being photographed at the event and the subsequent use of those photographs.

I realize that the Program or event and the filming, photographing and/or recording the MINOR is at a substantial cost to you, and in so doing and in using the Program, including any such material generated therefrom, you are relying upon the rights and consents granted to you by the MINOR and me as confirmed by this document.

TEMPLE JUDEA may release the photographs of the MINOR for publication in its bulletin and in local New York and Long Island newspapers in conjunction with a description of the Program or event. TEMPLE JUDEA shall not have any responsibility or liability for or from the story that may appear in the Bulletin or any newspaper in connection with the photographic materials.

I agree that neither I nor the MINOR will, at any time, revoke or disaffirm the grant of any such rights, releases or consents given to you herein.

I have read the foregoing consent and release, and am familiar with all of its terms and conditions. I understand and read English and understand the import of this consent and release and give it voluntarily for myself and the MINOR.

\_\_\_\_\_  
Name of Parent/Guardian (Print)

\_\_\_\_\_  
Witness: (Print Name)

\_\_\_\_\_  
Parent/Guardian (Signature)

\_\_\_\_\_  
Witness: (Signature)

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

Phone: (    ) \_\_\_\_\_

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