

## PHOTO AND VIDEO RELEASE FORM

I grant Hope of Israel Congregation the unlimited right to use and to reproduce audiovisual recordings and/or photographs\*, likenesses or the voice of my child in any legal manner and for the internal and external promotional and informational events of Hope of Israel.

I also agree to allow my child's work and/or photograph to be published in any HOI communication, including website and internet sites, social, print and/or electronic publications. I further understand that by signing this release, I waive any and all present or future compensation rights to be use of the above stated materials including print, electronic, and online media.

If you agree to your child's participation in the activities as outlined above and Hope of Israel Congregation's right to use audiovisual recording, photographs, and children's work in the manner described in this letter, please sign the Release Form.

| Name                       | e/s:                      |       |  |
|----------------------------|---------------------------|-------|--|
| Parent/Guardian signature: |                           | Date: |  |
| Paren                      | nt/Guardian name (print): |       |  |
| Paren                      | nt/Guardian address:      |       |  |
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