



CONSENT TO PHOTOGRAPH/PERMISSION TO USE PHOTOGRAPH

I grant to National PTA, Goya-Move, and their representatives and employees the right to take photographs and/or video of me and my family in connection with the Association. I authorize National PTA and Goya-Move, its assignees and transferees to use and publish the same in print and/or electronically.

I agree that National PTA and Goya-Move may use such photographs or videos of me with or without my name for any lawful purpose, including for example such purposes as publicity, illustration, advertising and web content.

I have read and understand the above:

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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