

## City of Laurel/Laurel PD PARENTAL AUTHORIZATION FORM

I give the City of Laurel/Laurel PD permission to publish in print, electronic and/or video format the likeness or image of my child to include, but not limited to:

- Advertising;
- Promotional and Informational Handouts; and
- Social Media Sites.

## Read and initial the following statements:

I grant permission for a photo/image that includes my/our child without any other onal identifiers to be published as listed above.	
I understand that the City of Laurel/Laurel PD will not use my child's imade mercial use and my child's personally identifiable information which includes name sidential addresses, e-mail address and phone numbers will never be included without express permission.	e,
I release all claims against the City of Laurel/Laurel PD with respect to copyright ownership and publication including any claim for compensation related to use of the materials.	
MINOR'S NAME (Please Print)	
PARENT/GUARDIAN'S NAME (Please Print)	
PARENT/GUARDIAN'S SIGNATURE	
PARENT/GUARDIAN'S CONTACT PHONE NUMBER	
Agreed to and signed this day of 20	