

Photo Release Form

I hereby grant permission to The Department of Ocean, Earth, & Atmospheric Sciences at Old Dominion University to use my child's photograph on its Web Site or in other official university printed publications without further consideration, and I acknowledge the university right to crop or treat the photograph at its discretion. I also acknowledge that the university may choose not to use my photo at this time, but may do so at its own discretion at a later date.

Child's name

Parent's name

Parent's signature

Date