## PHOTOGRAPH RELEASE CONSENT

for a minor

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Ι,

last name : first name : address : postal code : city : country :

ACTING AS LEGAL REPRESENTATIVE OF THE CHILD (CHILDREN)

last name, first name : last name, first name : last name, first name :

AUTHORIZED

reproduction and distribution of the <sup>1</sup> photograph(s) attached representing them in the IPOL http://www.ipol.im/ website.

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Date , place

Signature

<sup>&</sup>lt;sup>1</sup>number of photographs