Butler Public Library Photo/Image Release Form

I, the undersigned, grant permission to the Butler Public Library to use, reproduce, and/or publish the image of my child(ren). Such use includes the display or use of photographs taken of my child(ren) for use in materials that include, but may not be limited to, print materials such as brochures and newsletters, digital images such as those on the Butler Public Library website, and social media sites such as Facebook.

I give unrestricted permission for my child(ren)’s image to be used, reproduced, and/or published in print, digital, and social media. I agree that these images may be used, reproduced, and/or published by the Butler Public Library for a variety of purposes and that these images may be used, reproduced, and/or published without further notifying me. I do understand that the child(ren) will not be identified in conjunction with any images.

I also attest I am the parent or legal guardian of the child(ren) listed below.

Parent/Guardian Signature: ___________________________  Date: __________

Names and Ages of Minor Child(ren):

Name: ___________________________  Age: ______
Name: ___________________________  Age: ______
Name: ___________________________  Age: ______
Name: ___________________________  Age: ______

__________________________________________

One Ace Road, Butler, NJ 07405  973-838-3262  www.butlerlibrary.org