



William S. Hart Union High School District

21515 Centre Pointe Parkway, Santa Clarita 91350

The undersigned do/does hereby authorize the above-named school district and parties assigned by the district to photograph or permit other persons to photograph or video

_____. The undersigned also agrees that the school district may use or permit other persons to use the negatives, prints, and/or videos/films prepared therefrom for such purposes and in such manner as may be deemed necessary. It is understood that there is no compensation given or implied for such photographic reproductions.

Signature of person being photographed: _____

Signature of parent (if person is under 18): _____

Date: _____



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