



**American Cleft Palate-  
Craniofacial Association**

*...committed to team care*

## **American Cleft Palate-Craniofacial Association Photo Release Form**

I, \_\_\_\_\_, hereby grant permission to the American Cleft Palate-Craniofacial Association (ACPA) to use photographs and printed text documenting/representing (check as many as appropriate)

\_\_\_\_\_me (and/or) \_\_\_\_\_my child (and/or) \_\_\_\_\_my family

in materials promoting ACPA's activities and services or on the ACPA website (s). I understand that such photographs will become the property of ACPA and will be used for advocacy, education and marketing purposes, and may be distributed throughout the world. Distributions may be in the form of any print, visual, electronic (Internet) or broadcast media including but not limited to brochures, pamphlets, information sheets, slide presentations, videotape programs, website information, television programs, newspaper and magazine articles, and public service announcements. Identification may include name and institutional affiliation.

Check here if you wish to have only \_\_\_\_\_ the first name or \_\_\_\_\_ a false first name used in the materials or on the website.

*Please complete the following section if you are not the photographer of attached photos.*

I release and discharge \_\_\_\_\_ or his/her associates who took the photographs, the American Cleft Palate-Craniofacial Association and all parties acting under their authority from any claim I may have relating to such use and publication, including any claim for payment in connection with distribution or publication of the photographs.

**I grant permission requested on the terms stated above.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian (if under 16): \_\_\_\_\_ Date: \_\_\_\_\_

Please print name: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

**American Cleft-Palate Craniofacial Association**

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***The Cleft Palate Foundation is now ACPA Family Services.***

*Professionals and Families working together to build cleft and craniofacial awareness and improve care.*