



West Hawaii Water Safety Instruction Photo Release Form www.westhawaiiwatersafetyinstruction.com

I, hereby, consent to the use of these photographs

I hereby grant permission to West Hawaii Water Safety Instruction (WHWSI) to use my child's photograph on its website or in other promotional materials, and I acknowledge the right of WHWSI to crop the photograph at its discretion. I understand that the identity of my child will never be released to the public. I also acknowledge that any use of the photos is done without financial compensation to me or my family and that WHWSI may choose not to use my photo at this time, but may do so at its own discretion at a later date.

I have read the foregoing release and warrant that I fully understand the contents thereof.

Parent Signature	
Date	
Child/Children name (printed)	
I, hereby, do not consent to the use of these photograph	IS
Parent Signature	
Date	
Child/Children name (printed)	

Please let us know if you'd like a copy of this release for your records.