



Infinity B.O.L.D. Elites
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PHOTO RELEASE

I hereby grant Infinity B.O.L.D. Elites and its authorized agents permission to use my child's likeness in photograph(s)/video in any and all of its publications and in any and all other media, whether known or unknown or hereafter existing, controlled by Women Enuff, Inc, in perpetuity, and for other use by the organization. I will make no monetary or other claim against Infinity B.O.L.D. Elites, Women Enuff, Inc or any partners of the organization for the use of the photograph(s)/video.

Child's Name (Print Full Name): _____

Parent/Guardian (Print Full Name): _____

Parent/Guardian Signature): _____

Relationship to Child: _____

Telephone Number: _____

Street Address, City, State Zip code: _____