



Fall Fest 2009 Family Photo Release

I, (Name of Authorized Guardian) _____ ,

GRANT PERMISSION TO CFN TO USE PHOTOGRAPHS OF THE PERSONS LISTED BELOW. I UNDERSTAND THESE PHOTOS MAY APPEAR IN CFN'S *CONNECTIONS* NEWSLETTER, WEBSITE, BROCHURES, AND/OR OTHER PROMOTIONAL MATERIAL.

IMPORTANT: Please print clearly the name of each family member attending Fall Fest that we may photograph:

PLEASE DO NOT USE ANY PHOTOGRAPHS OF ANY MEMBER OF THE _____ FAMILY.

SIGNED: _____ DATE: _____