

100 Black Men of America, Inc.  
Of Triangle East

Photograph Release Form

***Child(ren)'s Name:*** \_\_\_\_\_

***Parent or Guardian Name:*** \_\_\_\_\_

***Child(ren)'s School:*** \_\_\_\_\_

***Parent/Guardian:***

I hereby acknowledge and consent to allow the Triangle East Chapter of the 100 Black Men of America, Inc. through my child's involvement with the Youth Enhancement Academy as a program provided by the aforementioned youth advocacy group to use photographs taken during working sessions to be used at the discretion of The Triangle East Chapter of the 100 Black Men of America, Inc.

I acknowledge these photographs will be used for, but not limited to, the purpose of the publications for The Triangle East Chapter of the 100 Black Men of America's Youth Enhancement Academy.

I acknowledge that these pictures taken during these sessions and any other activity sponsored by, or in conjunction with The Triangle East Chapter of the 100 Black Men of America's Youth Enhancement Academy may be used to the discretion of The Triangle East Chapter of the 100 Black Men of America, Inc.

***Parent/Guardian:*** \_\_\_\_\_ ***Date*** \_\_\_\_\_