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On behalf of myself and my minor child, I waive, release and discharge the Library Foundation of Hillsboro, its officers, agents, employees, and volunteers from any claim, demand, action or suit for defamation, invasion of privacy, or any violation of publicity, or any other negligent or intentional conduct relating to the publication or use of any photograph of me or my minor child.

I acknowledge that I have read and understand this Authorization and Release and that I have the authority to execute it on behalf of myself and my child. I do so voluntarily and with full knowledge of its binding effect.

Name of Child

Signature of Parent/Guardian

Date