Personal Photo Release Statement - Minor
Sam Noble Museum Education Department
University of Oklahoma

Participant Name ____________________________________________  Sex _____
(Please print clearly)

Name of Program ____________________________________________  Program date ________________

Clothing Description ____________________________________________________________________________

I give my permission to have my child’s photograph taken by the museum staff or affiliated agencies. I understand that these photographs may be used in museum and University of Oklahoma or other publications, both print and electronic.

Parent/Guardian Signature ____________________________________________  Date ________________
Personal Photo Release Statement - Adult
Sam Noble Museum Education Department
University of Oklahoma

Participant Name ____________________________________________ Sex _____
(Please print clearly)

Name of Program ____________________________________________

Clothing Description _____________________________________________________________________________

PHOTOGRAPHY RELEASE (optional)

I give my permission to have my photograph taken by the museum staff or affiliated agencies. I understand that these photographs may be used in museum and University of Oklahoma or other publications, both print and electronic.

Participant signature ____________________________________________ Date ________________