



MAIL AND PHOTO RELEASES CLOTHING SIZES

MAIL AND PHOTO RELEASE

I/We grant my permission for Galena Ridge staff to open and read mail and to take photographs of my/our child which may be used in the program newsletter, website, video, advertisements, or other program-related materials.

Student Name: _____

Parent/Guardian Signature **Date**

Parent/Guardian Signature **Date**

PARTICIPANT CLOTHING SIZES INFORMATION

Shirts: _____

Shoes: _____

Socks: _____

Pants/Shorts: _____

Underwear: _____

Hat: _____