



LIBERTAS CHRISTIAN SCHOOL

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I agree that Libertas Christian School may use such photographs of me with or without my name for any lawful purpose, including for example such purposes as yearbooks, publicity, illustration, advertising, and web content.

I have read and understand the above.

Student Signature: _____

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Printed Name: _____

Date: _____

Signature of parent or guardian: _____
(if student under age 18)

Printed Name: _____