Pianofriends Association

VISUAL/AUDIO IMAGE RELEASE FORM FOR MINORS for events organized or managed by Pianofriends Association

I, the undersigned parent or guardian of minor	
born on// at	
Nation	
Resident in	Country
Nation	
As parent or guardian of minor child	
Name and Surname of the minor	
born on/ at	
Nation	
Resident in	Country
Nation	
grant permission to the Association Pianofriends to taminor child recorded or taken during events organized Association. The Pianofriends Association has the absolute right and republish photographic portraits of the above midistorted in character or form, without restriction as to conjunction with the minor's name, or reproductions made through any medium and in any and all median for art, advertising, trade, or any other purpose whats I hereby understand that there will be no financial rend hereby release the Pianofriends Association and its or liability which I may ever have in connection with the or any third party.	d, participated or managed by the Pianofriends and permission to take, use, reuse, publish, nor child, in whole or in part, or composite or o changes or alterations from time to time, in of such photographs in colour or otherwise, now or hereafter known, including the internet, oever. nuneration. employees and agents from claims, damages
Date and signature of the legal guardian of the minor	
Date and signature of the minor	
Under Section 26 of the Personal Data Protection Cociation to process my personal data and those of the EU Countries.	· · · · · · · · · · · · · · · · · · ·

Release Form ENGminor V1 2018

Under Section 23 of the Personal Data Protection Code, I hereby authorize the Pianofriends Asso-

ciation to process my personal data, also in non EU Countries, for promotional purposes.

Date and signature of the legal guardian of the minor _____

Date and signature of the legal guardian of the minor _____