



Wisconsin Association for Home and Community Education

HCE Members and family, Guest Speakers Photo Release Permission Form

___ I grant permission to the Wisconsin Association for Home & Community Education (WAHCE) to use my photo and comments in WAHCE reports, articles, and publications designed for educational, informational, and promotional purposes. I understand some of these materials may be posted online for a period of time.

___ I grant permission to the Wisconsin Association for Home & Community Education (WAHCE) to use the photo and comments of my minor child, (name) _____, in WAHCE reports, articles, and publications designed for educational, informational, and promotional purposes. I understand some of these materials may be posted online for a period of time.

Cover Year – 2025

Print Subject's Name (adult or youth)	
Signature	
Date:	
Print Name of Parent or Guardian: <i>(Parent or guardian must sign if subject is under age 18)</i>	
Address	
City/State/Zip	
Telephone	
Email:	

Comments: _____

- All members need to sign either the new membership roll sheet or this photo release. Needs to be on file in your county extension office (indefinitely). And readily available upon request. Conference chairs and other special events – should maintain a copy respectively.



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