





325 Superior Avenue • Cleveland, Onio 44114 • 216.623.2800 • www.cpl.org

## PERMISSION TO PHOTOGRAPH/RECORD

The Cleveland Public Library has my permission to photograph/record:

## NAME (Please Print):\_\_\_\_\_

In order to publicize and promote the resources and materials of public libraries, the Ohio Center for the Book and the Octavofest Program, I understand that photographs and recordings of patrons may be duplicated, distributed, and posted on Library websites and other social media sites in order to promote public understanding of the public libraries and their programs. I hereby grant permission to the \_\_\_\_\_\_ Public Library, the Ohio Center for the Book, and other public libraries in conjunction with the Octavofest Program, to photograph and record me and/or my minor child/children, and to post those photographs and recordings on any social media site in conjunction with the Octavofest Program, including sites such as Facebook, websites, Flickr, blogs, on-line forums, YouTube, and chat rooms.

Signature:	
(If a minor, sig	gnature of parent or legal guardian)
Date:	
Street Address:	
City, State, Zip Code:	
Phone:	
Description of photography or recordi	ng:

Date:\_\_\_\_\_

Location:

395 New 7/09

**Print Form**