**Photo Release Form**

*Veterans of Foreign Wars Auxiliary 12345*

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby authorize the use of my photograph
for publication by VFW Auxiliary 12345, including, but not limited to, VFW Auxiliary 12345 social media sites, website, brochures, newsletters and e-newsletters.

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Signature Date

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VFW Auxiliary Representative Date