

"Safe Child ID" Emergency Photo Release Form

Dear First Class Photography:

Please be advised, as a part of the "Safe Child ID program," I hereby grant permission to First Class Photography to release my child's digital image file to the local police department handling my case. By signing this form, I acknowledge that I am the child's legal guardian or parent. First Class Photography will be instructed by the agency listed below how to distribute image file. This image file is to be used for the express purpose of finding a lost or missing child. The agency listed below has permission to reproduce and distribute this image to locate a missing or lost child.

There is no charge for this service.

I understand that for verification of my identity as the child's parent or guardian, and for privacy protection, this form must be signed by parent and faxed *from* police department. Police department will verify the identity of the person requesting photo release.

First Class Photography 24/7 fax line: 201-288-5400

Child's School Name: _____

Child's Name: _____

Image ID#: _____ DSC _____ JPG (Image file to be released)

Local Police Municipality (City, State, Precinct) _____

Police Phone Number: _____ Police Fax: _____

Missing Child Report Case Number _____

Parent's Signature: _____

PRINT PARENT'S NAME: _____

Parent's Day Phone Number: _____