**Photo Release Form**

*Veterans of Foreign Wars Auxiliary (insert #)*

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

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Signature Date

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VFW Auxiliary Representative Date