



**MAHARISHI SCHOOL OF THE AGE OF ENLIGHTENMENT**  
ADMISSIONS OFFICE, 804 DR. ROBERT KEITH WALLACE DRIVE, FAIRFIELD, IOWA 52556  
TEL: (641) 472-9400 FAX: (641) 472-1211

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**PICTURE AND NAME RELEASE FORM**

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I hereby give my permission to let my child(ren) be photographed for use by Maharishi School of the Age of Enlightenment in brochures, newspapers, videotapes, or other media. In addition, I authorize Maharishi School to publish the photograph of my child(ren) on the School website.

Name of Child(ren): 1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

Agreed to by: \_\_\_\_\_ Date \_\_\_\_\_  
Signature of Parent or Legal Guardian

I also hereby give permission for my child(ren)'s name(s) to be used for any of the above-named applications (either accompanying a photo or in the text of an article):

Agreed to by: \_\_\_\_\_ Date \_\_\_\_\_  
Signature of Parent or Legal Guardian