

PHOTO & MEDIA CONSENT FORM

Camper Name: _____

Parent/Guardian Name: _____

Phone Number: _____

Email Address: _____

Photo & Media Release Permission

Throughout camp activities, photos and videos may be taken to document camper experiences, celebrate achievements, and share camp activities with families and the community.

Please select one of the following options:

☐ YES, I GIVE PERMISSION

I grant permission for my child, listed above, to be photographed and/or recorded during camp activities. I understand that these images and recordings may be used by the camp for:

- Camp newsletters
- Camp website
- Social media pages
- Promotional materials
- Internal camp communications
- End-of-session presentations or highlights

I understand that no compensation will be provided for the use of these images or recordings.

☐ NO, I DO NOT GIVE PERMISSION

I do not grant permission for my child to be photographed, videotaped, or included in any camp media. I understand that camp staff will make reasonable efforts to exclude my child from photos and recordings used by the camp.

Parent/Guardian Acknowledgment

I have read and understand the information provided above and have selected my preferred option regarding photo and media consent for my child.

Parent/Guardian Signature: _____

Date: _____

For Camp Use Only

Photo Consent Status:

☐ Approved

☐ Declined

Staff Initials: _____

Date Received: _____

This form should be kept on file with the camper's registration records.

