

Photo Release for Minors

Photographer/producer _____

Assignment _____

Council (if appropriate) _____

Activity _____

Location _____

Dates _____

I, being parent/guardian of _____, hereby consent that the videotapes, photographs, motion picture film and/or electronic images for which she posed and/or audio recordings made of her voice, may be used by Girl Scouts of Citrus Council, Inc., its assignments or successors, in whatever way they desire, including television; furthermore, I hereby consent that such photographs, films, recordings, electronic images and the plates, tapes and/or software from which they are made, shall be their property and they shall have the right to sell, duplicate, reproduce and make other uses of such photographs, films, recordings, electronic images, plates, tapes and software as they may desire free and clear of any claim whatsoever on my part.

IN WITNESS WHEREOF I have heretofore set my hand, in the state of _____ ,

This _____ day of _____ , (year) _____ .

Name of girl _____

Name of parent or guardian (print) _____

Signature of parent or guardian _____

Address _____

City _____ State _____ Zip _____

Telephone number _____

Email _____