

4801 S. Biltmore Lane Madison, WI 53718 800-236-2710 gsbadgerland.org

Send completed forms to Badgerland Council, you can either send in the mail or photo or scan and email to communications@gsbadgerland.org

DATE(S):
PHOTOGRAPHER/PRODUCER:
ASSIGNMENT:
LOCATION:
ACTIVITY:

PHOTO RELEASE FOR MINORS

For good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I hereby consent and agree to the following:

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2. I shall have no right of approval, no claim to compensation and no claim (including, without limitation, claims based upon invasion of privacy, defamation or right of publicity) arising out of any use, alteration, blurring, illusionary effect or us e in any composite form of my name, picture, likeness, and voice. I agree that nothing in this Release will create any obligation on GSUSA or GSWIB to make any use of the Media or the rights granted in this Release. I hereby release and hold harmless Releasees from any claim for injury, compensation, or negligence resulting or arising from any activities authorized by this Release and any use of the Media by GSUSA or GSWIB.

NAME OF MINOR(S) (please print): _				
TROOP NUMBER(S):				
Photo Release for Minors (those und	er the age of eighteen):	authorized adult (tro	op leader/event coor	dian of the minor or dinator), hereby consent to I have the authority to give
NAME OF PARENT/LEGAL GUARDIAN	I/AUTHORIZED ADULT (p	lease print):		
AUTHORIZATION CAPACITY:	Parent	Legal Guardian	Troop Leader	Event Coordinator
SIGNATURE OF PARENT/LEGAL GUA	RDIAN/AUTHORIZED AC	DULT (REQUIRED):		
DATE:				
PARENT/LEGAL GUARDIAN/AUTHOR (will not be used for any other purpc			@	