

Girl Scouts of Virginia Skyline Council PHOTO RELEASE FORM

Photographer/Producer

Assignment

Location

Activity

Date(s)

Time

Receipt Release for Adults

I, being of legal age, hereby consent that the videotapes, photographs, motion picture film and/or electronic images in which I appear, and/or audio recordings made of my voice may be used by Girl Scouts of Virginia Skyline Council and Girl Scouts of the USA, their assigns or successors, in whatever way they desire. Furthermore, I hereby consent that such photographs, films, recordings, electronic images and the film, slides, disks plates or tapes 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, records, plates and tapes as they may desire free and clear of any claim whatsoever on my part.

IN WITNESS WHEREOF I have hereunto set my hand, in the State of _____,
on the date of _____.

Name (print)

Signature

Address

City

State

Zip

Receipt Release for Minors

I, being the parent/guardian of _____, hereby consent that the videotapes, photographs, motion picture film and/or electronic images in which she appears, and/or audio recordings made of her voice may be used by Girl Scouts of Virginia Skyline Council and Girl Scouts of the USA, their assigns or successors, in whatever way they desire. Furthermore, I hereby consent that such photographs, films, recordings, electronic images and the film, slides, disks plates or tapes 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, records, plates and tapes as they may desire free and clear of any claim whatsoever on my part.

IN WITNESS WHEREOF I have hereunto set my hand, in the State of _____,
on the date of _____.

Girl's Name (print)

Parent's Signature

Address

City

State

Zip
