

**CAMP CADET  
MEDIA CONSENT FORM**

Dear Parent/Guardian,

As the parent of a child/children at Camp Cadet, a Sargent Central Public School summer program, I agree to the following:

I understand that my child(ren) whose name(s) are listed below may be photographed or have videos taken during normal childcare hours, field trips, or activities. I understand that these photographs or videos may be used in promoting childcare services, either in print or electronically. Photographs and videos will NOT be used by staff to post to social media or sent to anyone other than the parents/guardians of the child(ren).

Camp Cadet may reference participant's identity in the following ways:

First Name(s) Only                       I do not give permission for Camp Cadet to use my child's name

|                       |                       |
|-----------------------|-----------------------|
| Parent/ Guardian Name | Relationship to Child |
| Parent/Guardian Name  | Relationship to Child |
| Child 1 Name          |                       |
| Child 2 Name          |                       |
| Child 3 Name          |                       |
| Address               |                       |
| City                  | State                 |
| Zip                   |                       |

**\*Both parents/guardians must agree and sign the consent for photographs or videos to be taken.**

I give permission for my child(ren) to be photographed or have videos taken for print or electronic use in promoting our childcare services and to be displayed in the program. I understand it is my responsibility to update this form if I no longer wish to authorize the above uses. I agree this form will remain in effect during my child's enrollment term. I understand that there will be no payment for me for my child's participation.

|                           |       |   |
|---------------------------|-------|---|
| Parent/Guardian Signature | Date: | <input type="checkbox"/> Agree<br><input type="checkbox"/> Disagree |
| Parent/Guardian Signature | Date: | <input type="checkbox"/> Agree<br><input type="checkbox"/> Disagree |