

## Lutz Photo Release Form

I, \_\_\_\_\_ the parent/guardian of \_\_\_\_\_ attending the Lutz Nature Summer Camp (2022) agree to the following:

I understand that my child(ren) that are listed below may be photographed at Lutz Summer Camp during camp hours at field trips or activities. I understand that these photographs may be used on the Lutz Children's Museum website or in printed materials in relation to the Lutz. I understand that the Lutz Children Museum owns the copyright to the multimedia material in which your child(ren) may appear.

Child's Name(s):

\_\_\_\_\_

With my signature below I grant permission for my child(ren) to be photographed or their images recorded for print or electronic use in relation to the Lutz Children's Museum. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I agree that this form will remain in effect during my child(ren)'s enrollment. I understand that there will be no compensation for my child(ren)'s participation in this release.

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_

Relationship to Child(ren): \_\_\_\_\_

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