

### Photo and Media Release Form

#### Child Information

Child's Full Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Scout Number: \_\_\_\_\_

#### Parent/Legal Gaudian Information

Parent/Guardian Full Name: \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

#### Consent and Authorization

I, the undersigned parent or legal guardian, give permission to Blue Mountain Council, Scouting America and its representatives to photograph and/or record my child listed above.

I understand that these photographs and/or recordings may be used for lawful purposes related to the organization's work, including but not limited to:

- Organization website.
- Social media platforms.
- Promotional materials (digital or print).
- Educational or informational materials.

I understand that:

- My child's name  **will** /  **will not** be used with the images. (check one)
- No compensation will be provided for the use of these images.
- The images may be edited or cropped, but will not be used in a misleading or inappropriate manner.
- The images may be shared publicly and may be viewable by others online.

#### Optional Limitation

- My child may be photographed, but not identified by name  
 My child may appear only in group photos  
 My child may not appear on social media  
 Other limitations: \_\_\_\_\_

#### Duration of Consent

This permission is valid until revoked in writing by the parent or legal guardian. Written revocation will not affect materials already published.

#### Release of Liability

I release and hold harmless Blue Mountain Council, Scouting America, its employees, volunteers, and representatives from any claims related to the use of these photographs or recordings as described above.

#### Signature

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

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

#### Return to:

Blue Mountain Council, Scouting America, 8478 W. Gage Blvd., Kennewick, WA 99336, [bmcinfo@scouting.org](mailto:bmcinfo@scouting.org)