



Photo/Video Release Form (For Troop/SU Use)

If granting permission for a single event, provide:

Event Date(s):

Activity:

Location:

If granting permission for an entire Girl Scout Membership Year, indicate the Membership Year:

Membership Year: October 1, - September 30,

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

1. I hereby grant _____ the unlimited right and permission to use, distribute, publish, exhibit, digitize, broadcast, display, reproduce or otherwise exploit my/my Girl Scout's name, picture, likeness and voice, or to refrain from so doing, in any manner or media whatsoever (whether now known or hereafter devised), anywhere in the world, by any persons or entities deemed appropriate by _____, for any purpose including, without limitation, any use for educational, advertising, non-commercial or commercial purposes.

2. When participating in Girl Scout activities, I (or the person I am registering) give consent to be interviewed, photographed, videotaped, or electronically imaged for the purposes of promotional materials, news releases, or other published formats for Girl Scouts Heart of New Jersey. The images will be the sole property of the Girl Scouts Heart of New Jersey, and/or SU #____, and/or Troop #____. I hereby release and hold harmless Girl Scouts Heart of New Jersey, Girl Scouts of the USA, SU #____, and Troop #____ from any claim arising from the use of these images.

Participant Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Name of Parent/Legal Guardian (if applicable, required for minors): _____

Signature of Adult Participant or Parent/Legal Guardian (required): _____ Date: _____

Adult Participant or Parent/Legal Guardian Email*: _____

Adult Participant or Parent/Legal Guardian Phone*: (____) _____

*(*will not be used for any other purposes or distributed to third parties.)*