

# PHOTO, PRESS, AUDIO, AND ELECTRONIC MEDIA RELEASE

NAME OF YOUTH:

\_\_\_\_\_

(Last)

(First)

(Middle)

\_\_\_\_\_

(Unit) (Number)

NAME OF PARENT/GUARDIAN: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

I, parent/guardian of \_\_\_\_\_, hereby consent that the photographs and/or motion picture or videotape for which s/he posed, and/or audio recordings made of her/his voice may be used by the Boy Scouts of America in whatever way they desire, including television and electronic media. Furthermore, I hereby consent that such photographs, films, recordings, plates and tapes are the property of the BSA, and they shall have the right to sell, duplicate, reproduce, and make other uses of such photographs, films, recordings, plates, and tapes as they may desire free and clear of any claim whatsoever on my part.

SIGNATURE: \_\_\_\_\_

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