

**“WHY WE LOVE CAMP”
2018
VIDEO CONTEST
CONSENT AND PHOTO RELEASE FORM**

REQUIRED CONTACT INFORMATION

BOTTOM PORTION MUST BE SIGNED FOR EACH CAMPER/STAFF INVOLVED IN CREATION OF OR FEATURED IN VIDEO

Video Title: _____

Town/Department: _____

Camp Name: _____

Contact Name*: _____

Contact E-Mail: _____

*Contact should be head of Department and/or Head Counselor who can be reached even when camp is over.

The undersigned gives permission for MRPA to use photographs and video submissions related to the “Why We Love Camp” video contest containing his/her likeness for publication, including, but not limited to, an informational brochure, press kit, annual report, newsletter, website, and/or media submissions.

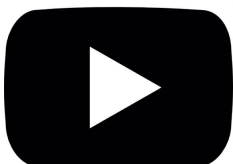
Child/Counselor Name

Date

Parent Signature (If under 18)

Signature

Please send completed form by fax, email or send by September 30, 2018.



E-Mail: skowrec@skowhegan.org

Fax: (207) 474-6913

or mail to:

MRPA c/o Denise LeBlanc 225 Water Street Skowhegan, ME 04976