

PLAISTOW RECREATION

PHOTOGRAPHY & VIDEO PERMISSION FORM

Participant Name: _____

Program / Activity: _____

Parent/Guardian Name: _____

Phone Number: _____

PHOTO & VIDEO RELEASE

Plaistow Recreation may take photographs and/or video recordings of participants during Recreation programs, activities, trips, special events, and community events.

These photographs and recordings may be used by the **Town of Plaistow Recreation Department** for promotional and informational purposes, including but not limited to:

- Recreation Department social media pages
- Town of Plaistow website
- Recreation Department flyers, brochures, and newsletters
- Program advertisements and promotional materials
- Community presentations and displays
- Other official Town of Plaistow Recreation communications

No participant will be identified by full name without additional permission.

PLEASE SELECT ONE:

☐ **YES, I GIVE PERMISSION** for my child to be photographed and/or recorded during Plaistow Recreation programs and for those images/videos to be used for the purposes listed above.

☐ **NO, I DO NOT GIVE PERMISSION** for my child to be photographed or recorded for promotional purposes.

I understand that I will not receive compensation for the use of photographs or video recordings. I also understand that I may withdraw this permission in writing at any time for future use.

SIGNATURE

Parent/Guardian Signature: _____

Date: _____

Child's Age/Grade: _____