



***Atlantic Canada's Camp for Burn Injured Children***

**CAMPER PHOTOGRAPHY RELEASE FORM**

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**Campers Name** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **Province** \_\_\_\_\_

**Postal Code** \_\_\_\_\_

**Telephone Number:** ( \_\_\_\_\_ ) \_\_\_\_\_

**The photograph(s) and / or general information may be used as needed in the administration of the *Cape Breton Firefighters Burn Care Society/Atlantic Burn Camp* and/or may be published in, or used by, any of the media (including newspapers, magazines, television, radio, pamphlets, brochures, reports, etc.), without any liability on the part of the *Cape Breton Firefighters Burn Care Society or Atlantic Burn Camp*.**

**Signature of Parent / Guardian** \_\_\_\_\_

**Date** \_\_\_\_\_