



PHOTO & VIDEO RELEASE FOR CARE CAMPS

Care Camps is a not-for-profit organization that raises funds to help kids with cancer and their families enjoy the opportunity to attend specialized pediatric oncology camps. Funds raised by Care Camps directly support pediatric oncology camps across the U.S. and Canada that are affiliated with the Children's Oncology Camping Association.

By signing this form, you are granting Care Camps permission to use any photos or videos of your child(ren) and/or family that are taken during the camp session as part of its fundraising efforts to support pediatric oncology camps. Images and videos may be used, for example, in brochures, social and digital media marketing, presentations with current and potential supporters, donor communications and television. Images and videos from the camp session **will not** be sold and **will not** be shared for any other purpose.

Please add the information requested and sign the release below.

I, _____ [Parent/Guardian name], located in _____ [state], agree to allow Care Camps to use photos, audio or videos taken of my child/family during the camp session for Care Camps' use in any and all of its publications and presentations, including print, social media, marketing materials or web-based publications according to the terms below:

1. I authorize Care Camps to publish my child's first name, voice, picture, video, and/or likeness in various forms of media and promotion, both now and in the future, for the limited and exclusive purpose of raising funds and awareness for pediatric oncology camps and programs.
2. I authorize Care Camps to copy, edit, enhance, crop or otherwise alter any photo or video for use in their publications, and I also waive any rights for approval or inspection of the photos or videos.
3. I understand and agree that all images, audio and videos taken for use by Care Camps during the camp session are the property of Care Camps and that Care Camps may copyright these materials.
4. I acknowledge that I am not entitled to any compensation or royalties with respect to Care Camps' use of the images, audio or video footage taken for its use to raise funds and awareness about oncology camps.
5. I agree that no further approval is required by me for Care Camps to use my child's name, voice, picture, or video procured at camp for the purposes described in this release.

By signing this form, I acknowledge that I have carefully read and fully understand the above release and agree to be bound by its terms. I agree to release and forever discharge any and all claims against Care Camps and its affiliates, successors and assigns, officers, employees, representatives, partners, agents and any person or organization using this material for Care Camps' media and promotion purposes.

Printed name of each child (and any other family members attending camp to be included in this release)

Printed name of Parent or Legal Guardian

Parent or Guardian Signature

Today's Date

Typing your name above as a parent or legal guardian represents your electronic signature.

Name and location of camp