

# Permission to

## Photograph/Video/Audio Record



*Occasionally, Sunflower Hill programs or activities may be photographed, videotaped, or audiotaped for educational, publicity or fundraising purposes. By giving permission, you also agree to convey to Sunflower Hill any right, title, interest in/to any and all photographic images and/or video and audio recordings (e.g. any royalties/proceeds). Please indicate if you give permission to appear in videos, photos, or audio recordings without compensation. (e.g. as part of brochures, slide shows/websites)*

**Yes, I give my permission to appear in a photo**

**Yes, I give my permission to appear in a video or audio recording**

**No, I do not want to appear in any photograph, video, or audio recordings**

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**Name of Individual (Printed)**

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**Phone**

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**Age**

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**Signature**

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**Date**

If individual is a minor under 18 or is an individual over 18 who has been legally conserved, please complete the following in addition to the above:

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**Name of Parent/Guardian/Conservator (Printed)**

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**Phone**

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**Signature**

**(OR)** Effective immediately, I rescind my authorization to be photographed, video/audio taped.

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**Name of Individual (Printed)**

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**Phone**

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**Signature**

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**Date**