

Troop/Group No. _____ **Leader** _____ **Program Level** _____

Subject *(give content of photo and describe the service project, trip, etc.)*

Date photo taken _____ **Photographer** _____

The undersigned hereby agrees and consents for them (or for their child) to be photographed for print, video, or electronic imaging. We understand that the images may be used in promotional materials, news releases, and other published formats for either the local Girl Scout council or Girl Scouts of the USA. We acknowledge that the images will be the sole property of either the local Girl Scout council or Girl Scouts of the USA.

NAME	SIGNATURE OF ADULT OR PARENT/GUARDIAN OF CHILD
1	
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This record is kept by the troop/group leader or sent to Council with photo for possible future use.

 I would like this photo returned after use. A self-addressed envelope is enclosed.


COMMUNICATIONS DEPARTMENT
Girl Scouts of Moccasin Bend Council
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 Chattanooga, TN 37415-0969