

Media Release Form 2019

Child's Full Name:	
Daily Update - Pictures for Parents We would like to send pictures, via email, taken of your child at camp to help facilitate conversation at home about the child's day at the camp. These pictures are to be shared only with those parents who give their consent and for no other purpose.	
I (Parent/Guardian's name)	
Signed: Date:	
We would like permission to use pictures and/or videos of your child on the CAPE Website, the CAPE Facebook Page and other Fundraising Forums in order to promote Camp ChAOS and Childhood Apriaxia of Speech.	
I (Parent/Guardian's name) my consent to allow (child's name) to be used to help promote camp ChAOS through the CAPE Website, the CAPE Fundrainsing Forums.	picture
Signed:	
Date:	

