

Camper Name \_\_\_\_\_

Troop/Pack # \_\_\_\_\_

**PHOTO RELEASE 2009**

To help promote Hawk Mountain Scout Reservation to other Scouting parents and Scouts, we are asking for your permission for the camp staff to take pictures of the activities at camp that might include a photograph of your son. This will help the Hawk Mountain Council, BSA develop future promotional materials such as camp newsletters. We do not include any personal information such as your son's name with any photograph we would choose to publish.

I hereby assign and grant to the Hawk Mountain Council, Boy Scouts of America, the right and permission to use and publish the photographs/film video tapes/electronic representations and/or sound recordings made of me and my son during the calendar year beginning January 1, 2009, through December 31, 2009 by the Hawk Mountain Council, Boy Scouts of America. I hereby release the Hawk Mountain Council, Boy Scouts of America, from any liability from such use and publication. I hereby authorize the reproduction, sale, copyright, internet web posting, exhibit, broadcast, electronic storage and/or distribution of said photographs/film/video tapes/electronic representations and sound recordings without limitation at the discretion of the Hawk Mountain Council, Boy Scouts of America., and I specifically waive any right to any compensation I may have for any of the foregoing.

Signature of Parent or Legal Guardian \_\_\_\_\_ Date Signed \_\_\_\_\_

**CAMPER RELEASE AUTHORIZATION**

My son may be released from Hawk Mountain Scout Reservation only with the following persons. I understand anyone picking up my son must be an adult(s) over 18 years of age and can leave camp only after securing the signature of an adult leader in camp from his unit. I understand and will inform persons reporting to Hawk Mountain Scout Reservation to pick up my son that they will be required to provide positive photo identification at the Camp Administration Building upon their arrival.

Printed name of adult picking up the camper \_\_\_\_\_

Driver's license # & State \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Date Leaving \_\_\_\_\_ Time Out \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Estimated time of return \_\_\_\_\_ Phone # of person picking up camper \_\_\_\_\_

Address of person picking up camper \_\_\_\_\_

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Printed name of adult picking up the camper \_\_\_\_\_

Driver's license # & State \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Date Leaving \_\_\_\_\_ Time Out \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Estimated time of return \_\_\_\_\_ Phone # of person picking up camper \_\_\_\_\_

Address of person picking up camper \_\_\_\_\_

I, being a parent or legal guardian of the camper, do hereby authorize the Hawk Mountain Council, Inc. #528, Boy Scouts of America, to release my child to the person(s) listed above.

Signature of Parent or Legal Guardian \_\_\_\_\_ Date Signed \_\_\_\_\_