



Permission to Videotape and/or Photograph

I _____ am 18 years or older.
(Name, please print)

I _____ am the parent or legal guardian of _____.
(Name, please print) (Name, age)

I understand the City of _____ may photograph or videotape the events or activity in which I am (or my child is) participating. I give my permission for the City to use photographs or videotape of me (or my child) for the purpose of promoting the City of _____ and its services/programs, the Oklahoma Department of Libraries and the Institute of Museums and Libraries. I give my permission with the following understanding: No compensation of any kind will be paid to me (or my child) at this time or in the future for the use of my (or my child's) likeness. All personal information will be kept confidential and will not be used.

Permission is not required to take part in city events.

Signature: _____ Date: _____

Address: _____

City, Zip: _____

Phone: _____