



PHOTO/VIDEO CONSENT FORM

By signing this form, I hereby authorize any photographs or video footage taken of myself or my child(ren) to be used by the Western Development Museum (WDM) for promotional and marketing purposes in any format (print or digital) including on the WDM's website and social media channels. I waive all rights to privacy and compensation in connection with the use of my, or my children's, images. I am over 19 years-of-age and the parent or legal guardian of the child(ren) and have read this waiver and am familiar with its content.

Name of Parent/Guardian (Please print): _____

Address: _____

City/Town: _____ Prov: _____ Postal Code: _____

Phone Number: _____ Email: _____

Signature: _____ Date: _____

Name of child: _____

Name of child: _____

Name of child: _____

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FOR WDM USE:

Photograph/Video Identifier: _____