

WEST PARK CULTURAL CENTER

---

**CAMP GINKGO**  
**PHOTO/VIDEO WAIVER**

Upon signing this form I give West Park Cultural Center permission to use the photographic, and/or video image of my child(ren) listed below in the presentation of the Center's promotional materials. This material includes images for publication and on our website.

Child's Name \_\_\_\_\_

Child's Name \_\_\_\_\_

Child's Name \_\_\_\_\_

Child's Name \_\_\_\_\_

Parent Name \_\_\_\_\_

Parent Phone \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date