

Deaf Talent® Kids & KODA Film Kamp

Parent/Guardian Media Release and Consent Form

Child's Name: _____

Parent/Guardian Name: _____

Media Release Authorization

Deaf Talent® Kids & KODA Film Kamp will document camp activities throughout the summer retreat through photography, video recording, and audio recording.

By signing this form, I authorize **Jade Films and Entertainment, LLC**, the parent company of **Deaf Talent Creative Lab®**, to photograph, video record, and audio record my child while participating in camp activities.

I grant Jade Films and Entertainment, LLC the irrevocable right and permission to use, reproduce, edit, publish, distribute, and display my child's image, likeness, voice, name, and/or performance captured during the camp for educational, promotional, marketing, publicity, archival, fundraising, and other lawful business purposes. These materials may be used in print publications, websites, social media platforms, presentations, promotional videos, documentaries, broadcasts, streaming platforms, and other current or future media formats.

I understand that:

- My child will not receive financial compensation for the use of these materials.
- Jade Films and Entertainment, LLC owns all rights to the photographs, video recordings, and audio recordings created during the camp.
- Reasonable efforts will be made to portray all participants respectfully and professionally.
- This authorization is voluntary and remains in effect unless revoked in writing before any future use that has not already occurred. Materials already published or distributed cannot be withdrawn.

I certify that I am the parent or legal guardian of the child named above and have the legal authority to grant this permission.

Parent/Guardian Signature: _____

Printed Name: _____

Date: _____

Relationship to Child: _____

Emergency Contact Number: _____