

Drop-Off Authorization Form

I, _____ authorize _____
print parent/guardian full name *print full name*
to review and sign all required forms for my child, _____
print full name

during registration at West Virginia Christian Youth Camp. I understand this will include reviewing and verifying the accuracy of my child's medical information as well as who is authorized to pick up my child. Further, I grant this authorized individual permission to sign the photo and general release forms for my child on my behalf.

Parent/Guardian Signature: _____ Date: _____

As the authorized individual named above, I acknowledge the responsibility of reviewing and signing all required forms for the camper listed above. I understand the parent/guardian's intentions for their child regarding their time at West Virginia Christian Youth Camp.

Authorized Individual: _____ Date: _____

PHOTO RELEASE

I hereby grant the West Virginia Christian Youth Camp permission to use my likeness in a photograph, video, or other digital media ("photo") in any and all of its publications, including web-based publications, without payment or other consideration.

I understand and agree that all photos will become the property of the West Virginia Christian Youth Camp and will not be returned.

I hereby irrevocably authorize the West Virginia Christian Youth Camp to edit, alter, copy, exhibit, publish, or distribute these photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.

I hereby hold harmless, release, and forever discharge the West Virginia Christian Youth Camp from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

GENERAL RELEASE

The information provided is correct to the best of my knowledge. The person herein described has permission to engage in all camp activities except as noted. My child will abide by the camp rules and follow staff directives. I hereby give my permission to the camp medical staff to secure the proper medical treatment for my child in case of injury or illness. I have read and understand the above photo release.