

Permission to Photograph and/or Video-Record

I understand that Mybrary- Your Community Library/NGM may photograph or video-record the events or activities in which my child is participating. I give my permission for the Library/NGM to use photographs or video-recordings of my child for the purpose of promoting the Library/NGM and its services/programs. 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 child's likeness. I release and hold harmless the Library/NGM and its agents and employees from and against any claims or liability arising from or related to the use, publication, or distribution of the photographs and/or video-recordings.

I am the parent or legal guardian of _____, and

- ☐ I **give** my permission to Mybrary- Your Community Library/NGM to use photographs and/or video-recordings as stated above.
- ☐ I **do not** give my permission to Mybrary- Your Community Library/NGM to use photographs and/or video-recordings as stated above.
-

Permission to Photograph and/or Video-Record

I understand that the Mybrary- Your Community Library/NGM may photograph or video-record the events or activities in which my child is participating. I give my permission for the Library/NGM to use photographs or video-recordings of my child for the purpose of promoting the Library/NGM and its services/programs. 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 child's likeness. I release and hold harmless the Library/NGM and its agents and employees from and against any claims or liability arising from or related to the use, publication, or distribution of the photographs and/or video-recordings.

I am the parent or legal guardian of _____, and

- ☐ I **give** my permission to Mybrary- Your Community Library /NGM to use photographs and/or video-recordings as stated above.
- ☐ I **do not** give my permission to Mybrary- Your Community Library/NGM to use photographs and/or video-recordings as stated above.
-

Oceans of Possibilities

Mybrary- Your Community Library / 2023 Teen Summer Reading Registration

Sponsored by: Nevada Gold Mines

Teen's Name: _____ Age (12-18): _____

City: _____ Phone Number: _____

Branch: _____

T-Shirt Size.

☐ Youth Medium ☐ Youth Large ☐ Adult Small ☐ Adult Medium ☐ Adult Large Other _____

Parent/Guardian Name (**PRINT**)

Parent/Guardian Signature

Oceans of Possibilities

Mybrary- Your Community Library / 2023 Teen Summer Reading Registration

Sponsored by: Nevada Gold Mines

Teen's Name: _____ Age (12-18): _____

City: _____ Phone Number: _____

Branch: _____

T-Shirt Size.

☐ Youth Medium ☐ Youth Large ☐ Adult Small ☐ Adult Medium ☐ Adult Large Other _____

Parent/Guardian Name (**PRINT**)

Parent/Guardian Signature