



## Photo & Video Consent Form

**Child's Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

### **Consent:**

I give permission for WhizKid Wonderland Holiday Camp to take photos/videos of my child during camp activities. These may be used for promotional purposes, including social media and the website.

I understand that no compensation will be provided, and I waive the right to review or approve materials featuring my child. This consent is valid for as long as my child attends WhizKid Wonderland Holiday Camp unless revoked in writing.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

