



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: _____

