



Camp Granada

Opening Day Check-in



STUDENT INFORMATION

First name:	Last name:

IN CASE OF EMERGENCY

Name of Emergency Contact:	Home phone number: ()
Relationship to student:	Cell phone number: ()
Medications that may need to be taken during camp (<i>must be administered by parent/guardian</i>):	Food or other allergies:
Who is authorized to pick-up your child? (<i>Campers will not be released to people whose names do not appear below.</i>)	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%; border-bottom: 1px solid black;"></div> <div style="width: 45%; border-bottom: 1px solid black;"></div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 45%; border-bottom: 1px solid black;"></div> <div style="width: 45%; border-bottom: 1px solid black;"></div> </div>	

PHOTO RELEASE FORM

This release applies to the interview(s) conducted and information (including images) obtained on and after: _____ Date(s)	
The subject matter or purpose of the interview(s): _____	
The interview was conducted by: _____	
<p>I authorize Austin Peay State University and any of its authorized agents or employees to:</p> <ol style="list-style-type: none"> a) Record my likeness, voice and/or information/property on a video, audio, photographic, digital, and electronic or any other medium. b) Use my name in connection with the above-referenced recordings c) Use, reproduce, exhibit or distribute in any medium (e.g., print publications, video tapes, DVD, CD-ROM, Internet/WWW) these recordings for any purpose that the university, and those acting pursuant to its authority, deem appropriate, including historical, scholarly, educational, research, commercial and non-commercial purposes. d) Review my student record to be certain I am in good standing with the University and have not been subject to disciplinary action. <p>I release the university, its successors and assigns, agents, employees, and governing entities from any personal or proprietary right I may have in connection with such use.</p> <p>I understand that the materials obtained and developed through the interview belongs to the university, that I have no right to control the use of my likeness, voice and/or information/property in the above materials and that I will not receive payment or any other compensation in connection with the use of the materials</p>	<p>I have read and fully understand the terms of this release.</p> <p>Name (print): _____</p> <p>Date of Birth: _____</p> <p>Address: _____</p> <p>Local Phone: _____ Cell Phone: _____</p> <p>Signature: _____</p> <p>Date: _____ E-mail: _____</p> <p>Parent/Guardian Signature (if under 18): _____</p> <p>Date: _____</p>