

## PHOTO RELEASE FORM

FOR PHOTOGRAPHS, FLIMS, SLIDES, AND RECORDING OF  
PUPIL ENROLLED IN THE SCHOOL-AGE PROGRAM - 2018-2019

STUDENTS'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

NAME OF AGENCY: SHAW JCC OF AKRON

SCHOOL CONTACT: DIANE GALIZIO

PARENT/GUARDIAN RELEASE:

DEAR PARENT/GUARDIAN:

The Shaw JCC of Akron routinely utilizes visual images of student activities of promote understanding of the child care programs through publications and marketing materials. We would like the opportunity to utilizes images of your child to help foster this understanding.

I/we hereby agree that the student listed above **CAN** or **CAN NOT** be photographed or video taped for the use in the Shaw JCC publications, marketing materials, and websites.

(CIRCLE ONE CAN OR CAN NOT)

Signature of Parent/Guardian: \_\_\_\_\_

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

## SWIM PERMISSION

For school-age children form August to July 2018-2019

I give/do not give my child \_\_\_\_\_ DOB \_\_\_\_\_  
who is a swimmer/non-swimmer permission to participate in the Shaw JCC of Akron, school-age swim program, at the Shaw JCC's indoor/outdoor pool located at 750 White Dr, Akron, Ohio

I understand that theShaw JCC of Akron is providing certified lifeguards and sufficient school-age staff to meet staff/child ratios, as mandated by the State of Ohio.

Signature of Parent/Gaurdian \_\_\_\_\_

Date \_\_\_\_\_