



Photo Release Form

I, _____, acknowledge that my son and/or daughter is participating in musical and artistic experiences at the Oxford Library and may have photo or video taken of them during their experience.

By signing this form I acknowledge:

- I am the legal parent or guardian of the child.
- I authorize Oxford Library to take photos or videos of my child's experience during the 2022 Oceans of Possibilities Music Camp.
- I grant Oxford Library the use of these photos or video on social media platforms (such as Facebook, YouTube, Instagram), as well as for promotional advertisement for the library (such as news articles, flyers, etc.)
- I grant Oxford Library the permission to edit these photos or videos for time.
- I understand that I will not receive monetary compensation for these photos/videos.

Please Circle: I would like Oxford Library to use my child's: (please circle)

Complete Name First Name Nickname I'd like the photo to remain anonymous

☐ I have read and agree to the terms and conditions.

_____ Signature

_____ Print Name

_____ Student Name

_____ Date

Oxford Library is a 501(c)3 not for profit organization

48 S. 2nd Street Oxford, PA 19363

610-932-9625

oxfordpubliclibrary.org