



Photo Release

I, _____, as guardian, parent, or independent individual give my permission to Beyond Our Boundaries for photos to be taken while participating in Beyond Our Boundaries activities. I understand that any photos taken may be used for educational purposes, for provider fairs, & for use in the local newspapers. I also understand that, within their control, Beyond Our Boundaries staff will take great care to ensure that participants are shown in a positive light & I release Beyond Our Boundaries from all liability regarding publication of photos.

Please check all that apply:

- I give permission for trip photo books (one sent to everyone on the trips, not publicized online or in the public).
- I give permission for online use on B.O.B.'s website.

OR:

- I do NOT give permission for any photos to be taken or used by B.O.B.

Participant Name _____

Parent/ Guardian's Name _____

Signature _____

Date _____