Canadian Traditional Scouting Association Photography/Videography Release Participant Release

l,	(print Participant's name)
	ditional Scouting Association (the Photographer), his or her
	s in interest, legal representatives, and heirs the irrevocable right
	nal name), picture, portrait, or photograph in all forms and in all
	nout any restriction as to changes or alterations (including but not
•	ed representations or derivative works made in any medium) for
	exhibition, or any other lawful purposes, and I waive any right to
	raph(s) or finished version(s) incorporating the photograph(s),
	y be created and appear in connection therewith.
	hold harmless the Photographer, his or her assigns, licensees,
	epresentatives and heirs from any liability by virtue of any blurring,
· · · · · · · · · · · · · · · · · · ·	usion, or use in composite form whether intentional or otherwise,
	d in the taking of the photographs, or in any processing tending
	inished product, unless it can be shown that they and the
	iously caused, produced, and published solely for the purpose of
	ridicule, scandal, reproach, scorn, and indignity.
0 .	owns the copyright in these photographs and I hereby waive any
	ny usage of the photographs or works derived therefrom,
	ims for either invasion of privacy or libel. I am competent to sign
	elease shall be binding on me, my legal representatives, heirs,
and assigns. I have read this	release and am fully familiar with its contents.
This agreement will remain in	effect until age 18 or revoked in writing.
Participant Name:	
Address:	
Date:	
	, 20
Consent (if Participant is a	minor)
I am the parent or gu	uardian of the minor named above and have the legal
authority to execute	the above release. I approve the foregoing and waive any
rights in the premis	ses.
<u>OR</u>	
	uardian of the minor named above and have the legal
	the above release. I DO NOT give permission for my
child's photo to be	used.
Parent or Guardian Name	
Signed:	
Address:	_
, tadi 000.	-
Date:	20