



NATURE CENTER
AT SHAKER LAKES

Outdoor Adventure Camp Photo Release for Marketing Purposes

Please sign either Option 1 or Option 2

Option 1: I give permission to the Nature Center at Shaker Lakes to make commercial, non-commercial, social media, and web content use of any activity photographs of my child during this program.

Signature of Parent/Guardian: _____ **Date** _____

Option 2: I DO NOT give permission to the Nature Center at Shaker Lakes to make commercial, non-commercial, social media, and web content use of any activity photographs of my child during this program.

Signature of Parent/Guardian: _____ **Date** _____