



## Child Video/Photo Authorization Form

I authorize you to take photographs/video of my child and for those images to be used by Lions Clubs International for the purpose of printed, digital, video or other mediums for the purposes of promotion and publicity for Lions Clubs International. **Those images shall be the property of LIONS CLUBS INTERNATIONAL for any and all use.**

Name of Child \_\_\_\_\_ Date \_\_\_\_\_

Group (School, Camp, etc.) \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Relationship \_\_\_\_\_

Signature \_\_\_\_\_



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