



**NEW JERSEY STATE POLICE • TROOPER YOUTH WEEK**

# **Parental/Guardian Consent for Photograph & Audio-Visual Release Form**

The New Jersey State Police requests your permission to reproduce through printed, audio, visual, or electronic means activities in which your child has participated in the New Jersey State Police Trooper Youth Program. Your authorization will enable us to use the photographs and video footage taken during the Trooper Youth Week program to promote the program through the use of mass media, displays, brochures, websites, etc.

- I, as a parent or guardian of the below-named Trooper Youth, fully authorize and grant the New Jersey State Police and its authorized representatives the right to print, photograph, record, and edit as desired, the name, image, likeness, and/or voice of the below-named Trooper Youth on audio, video, film, slide, or any other electronic and printed format currently developed for the purpose stated or related to the above.
- I understand and agree that the use of such photographs and video will be without any compensation to the Trooper Youth or the Trooper Youth's parent or guardian.
- I understand all photos/videos will be property of the New Jersey State Police. Photos/Videos may be used without specific notification.
- I understand and agree that the New Jersey State Police and/or its authorized representatives shall have the exclusive right, title, and interest, including copyrights, of such photographs and video recordings.
- I understand and agree that the New Jersey State Police and/or its authorized representatives shall have the unlimited right to use the photographs or videos for any purpose stated or related to the above.
- I hereby release and hold harmless the New Jersey State Police and its authorized representatives from all actions, claims, damages, costs, or expenses, including attorney's fees, brought by the Trooper Youth and/or parent or guardian which relate to or rise out of any use of these photographs or videos as specified above.
- The New Jersey State Police will not release any personally identifiable information without prior consent of the Trooper Youth's parent or guardian.

*I have read and understand the contents of this Parental/Guardian Consent for Photograph & Audio-Visual Release Form and I am signing voluntarily.*

\_\_\_\_\_  
Participant - Print Name

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian - Print Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date