

YAAS! Photo, Image, and Voice Recordings Consent

I understand that, unless noted below, photos, video, or audio recordings made of me or my family during YAAS! activities may be used by the Joyce L. Sobel Family Resource Center, without compensation, to promote the YAAS! Program. I understand that my name may be revealed in descriptive text or commentary.

I agree _____

No, I do not agree _____

Member/Parent Signature: _____

Date: _____