



**Media Permission/ Release  
Form**

Name \_\_\_\_\_ Youth Name (s) \_\_\_\_\_

Service Member Name \_\_\_\_\_ Service Member Unit \_\_\_\_\_ Date \_\_\_\_\_

Contact Number/Email \_\_\_\_\_

Address \_\_\_\_\_

**PHOTO/PRESS RELEASE**

I understand the Missouri National Guard Family Program will publish my and/or my child's (name listed above) photo, video, writing, and/or art work on Missouri National Guard publications and Missouri National Guard applicable Facebook pages. I accept any risks involved in this social media release. I grant the Missouri National Guard Family Program and its associate staff and subordinate entities the right to take, use, reproduce, assign and/or distribute photographs, films, non-confidential information, videotapes and sound recordings of the Missouri National Guard Family Program participants, for use in any such materials as the National Guard Family Program or its associated entities may create, without any payment to or future approval by me. I concur that there shall be no payment for such use.

\_\_\_\_\_  
Parent or Legal Guardian Signature

\_\_\_\_\_  
Date

**NON-RELEASE**

I do not consent to have my and/or child's photo, video, writing, and/or art work represented and/or released for any purpose.

\_\_\_\_\_  
Parent or Legal Guardian Signature

\_\_\_\_\_  
Date