Waterman's Internship Program

Photography / Video Release Form

I understand that while participating in and attending functions of the Waterman's Internship Program that photographs and videos may be taken. I hereby give consent to have photos and videos containing my likeness to be used on the mrc.virginia.gov website, in electronic publications, social networking sites, distribution materials, newsletters and publicity materials such as local newspapers.

I understand that this consent will remain valid for an indefinite period of time.

I am the parent or legal guardian of_____

Printed Name:_____

Signed:_____

OR IF YOU ARE OVER THE AGE OF 18

Printed Name:_____

Signed:_____