



Photo Consent Form

Subject Name

Date

I understand that during the course of my participation in MyPI Arkansas, the Arkansas Youth Preparedness Initiative, I may be photographed during course delivery, skills illustration, etc.

I permit the Instructors and/or Administrators to photograph:

(circle one): (1) my image (2) my child's image (3) my employees' image

and use those photographs for educational and publicity purposes. I release the University of Arkansas, its Board of Trustees, the University of Arkansas Division of Agriculture Research and Extension, the University of Arkansas Cooperative Extension Service, Mississippi State University (MSU), the MSU Extension Service, the MSU School of Human Sciences, MyPI National, the Mississippi Office of Homeland Security, and the National Institute for Food and Agriculture from any claims that might arise from use of these photographs.

Signature of participant (if 18 or over)

Parent/Guardian (if participant is under 18)

If participant is under 18, a parent or guardian must write the child's name as the subject and grant permission by signing on the appropriate line.