RELEASE OF MINOR
I, the parent or guardian of, troop number, (Name of Camper/Staff)
authorize WLACC to release my son to
(Name of individual picking up Scout)
on at The aforementioned individual will provide all transportation (Date) (Time)
(Date) (Time)
from WLACC at no cost to the camp or Western Los Angeles County Council.
Reason for Departure:
Signature of Parent or Guardian: Date:

PHOTO (TALENT) RELEASE

I hereby assign and grant to the Boy Scouts of America the right and permission to use and publish the photographs/film/video/electronic representations and/or sound recordings made during my Scouts visit to any WLACC, BSA activity. I hereby release the Boy Scouts of America, and the Western Los Angeles County Council from any and all liability from such use and promotion. I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage and/or distribution of said photographs/film/video tapes/electronic representations and/or sound recordings without limitation at the discretion of the Boy Scouts of America, Western Los Angeles County Council. I specifically waive any right to any compensation I may have for any of the foregoing.

Signature of Parent or Guardian: _____ Date: _____

CONSENT TO FULL PROGRAM

Western Los Angeles County Council Summer Camp programs may include some or all of the following activities: horseback riding, archery, swimming, boating, sailing, hiking, mountain biking, crafts, use of knife and ax, rock climbing, rappelling, team sports, and other activities. Your signature below will grant consent for the above named youth to participate in any of the above activities at camp. Please check one of the options and state any limitations:

[] Consent to full program [] Consent to program with the following limitations/exclusions:

Signature of parent/guardian _____ Date _____