

Media Release Form
State of Alaska
Department of Natural Resources
Office of Boating Safety

I do hereby authorize the Alaska Office of Boating Safety, its agent's successors; assignees subareas, subsidiaries and or affiliates to use photographs and videos of my student _____ in any or all of its publicity without limitation. Said photographs, videos or information shall remain the property of the State of Alaska, Office of Boating Safety and may be used without using my name or child's name. I agree that I am donating this material and that I will not be compensated. I do not expect or require approval of the layout or designed use of said items prior to publication. I understand these photos may appear in social media such as Facebook, Twitter, YouTube and other educational and promotional materials in print and presentations to the public.

I also agree to hold harmless, the State of Alaska, Office of Boating Safety its agents, successors, assignees, subsidiaries, subareas, and or affiliates and understand that my pictures will not be returned to me.

I, the undersigned, being the parent/guardian of the above named minor, do hereby consent to the above authorization and general media release.

Yes – I consent

Participant name: _____

Participant signature: _____ Date: _____

A parent or legal guardian signature is required if participant is under 18 years:

Parent or legal guardian name: _____

Parent or legal guardian signature: _____ Date: _____



www.alaskaboatingsafety.org * 907 269-8706