

Photo Release Form

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Print Individuals Name (Adult or Youth) _____

Signature of Individual _____

Date _____

Print Name of Parent/Guardian _____

Signature of Parent/Guardian _____
(If individual is under 18)

Address _____

City, State, Zip _____

Phone Number _____

Please return to:

4-H Camp
Dane County Extension Office
Fen Oak Resource Center
1 Fen Oak Court - Rm 138
Madison Wi 53718-8812