

## Boy Scouts of America 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 tapes/electronic representations and/or sound recordings made of my son this date by the Boy Scouts of America, and I hereby release the Boy Scouts of America from any and all liability from such use and publication.

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 and I specifically waive any right to any compensation I may have for any of the foregoing.

Name of Scout: \_\_\_\_\_

Scout Signature: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Photo/Recording Session Date: \_\_\_\_\_

BSA Council/Unit Number: **1001**

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_

**If you have any questions, contact the Scoutmaster.**

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