



Margate Fire Department

PROUDLY SERVING THE RESIDENTS AND VISITORS OF
THE CITY OF MARGATE
ISO Class 1 Fire Department



Cadet Media Release

The media release for anyone under the age of 18 must include the signature of a parent or guardian!

I, parent and/or legal guardian of _____, hereby grant the City of Margate the right and permission to use, produce, edit, project, display, copyright, and/or publish my child's images, likeness, and visual or audio recordings in which my child may be included in the whole or part, developed during participation in the City of Margate Fire Department Cadet Program and thereafter, and to circulate the same in all forms and media for any lawful purpose whatsoever. My consent includes, but is not limited to images, likenesses and recordings that may be deemed to be educational records under the Family Education Rights and Privacy Act of 1974 ("FERPA").

I understand that such use of my child's images, likeness and recordings, and all subsequent uses are the property of the City of Margate and may be viewed, accessed and/or disseminated internally and to the public or other organizations without further permission from me. I therefore relinquish and give the City of Margate all rights, title and interest in my child's image, likeness or recordings produced in connection with the Margate Fire Department Cadet Program. I hereby waive any right to inspect or approve my child's image, likeness or recording or any finished material incorporating the same.

I further understand I will receive no compensation in connection with the use of my child's image, likeness or recordings.

I understand the City of Margate will not identify my child by name in connection with any image, likeness or recording of my child appearing on any approved City of Margate internet pages on the World Wide Web.



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This Release is For (Name)		Program Name	
<input type="checkbox"/> Adult <input type="checkbox"/> Child		Margate Fire Department Cadet Program	
Parent/Guardian Name (Please print)			
Signature of Parent/Guardian		Date	

I **do not** authorize the use of my child's image, likeness, or recordings for media release and/or educational purposes.

This Release is For (Name)		Program Name	
<input type="checkbox"/> Adult <input type="checkbox"/> Child		Margate Fire Department Cadet Program	
Parent/Guardian Name (Please print)			
Signature of Parent/Guardian		Date	