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State of California - Natural Resources Agency
DEPARTMENT OF PARKS AND RECREATION

VISUAL MEDIA CONSENT

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NAME OF SUBJECT(S) DEPICTED IN VISUAL MEDIA *(print)*

By signing this form I hereby certify that I am the subject and/or parent or legal guardian of the person(s) under 18 years of age named above and I hereby sign this consent form on behalf of myself and/or such person(s) in accordance with the statements above.

SIGNATURE OF SUBJECT AND/OR PARENT/LEGAL GUARDIAN	PRINTED NAME	PHONE NUMBER
▶		( )
ADDRESS	CITY/STATE/ZIP CODE	E-MAIL ADDRESS

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PARK UNIT AND/OR LOCATION WHERE VISUAL MEDIA CAPTURED *(print)*	UNIT NO.

PHOTOGRAPHER'S NAME AND TITLE *(print)*	DATE VISUAL MEDIA CREATED

IMAGE NUMBERS

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