



# Media Release Form

## Instructions for Media Release Form

The Media Release Form grants permission for the St Kitts and Nevis Robotics Association (SKNRA) to use photographs and videos of participants during the Robomindset Summer Camp for promotional purposes. Please follow these instructions to complete the form:

**1. Participant Information:**

- Provide the participant's full name, date of birth, age, gender, and address.
- Include the parent/guardian's name, phone number, and email address.

**2. Consent for Use of Media:**

- Read the consent statement carefully, which grants SKNRA permission to take and use photographs and videos of the participant.
- Understand that these media may be used on SKNRA's website, social media, printed materials, and press releases.

**3. Agreement:**

- If you agree to the terms, sign the form as the parent/guardian of the participant.
- Optionally, provide the participant's full name if it differs from the participant information section.



## Participant Information

- **Full Name:** \_\_\_\_\_
- **Date of Birth:** \_\_\_\_\_
- **Age:** \_\_\_\_\_
- **Gender:** \_\_\_\_\_
- **Address:**  
\_\_\_\_\_  
\_\_\_\_\_

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- **Parent/Guardian Name:** \_\_\_\_\_
  - **Parent/Guardian Phone Number:** \_\_\_\_\_
  - **Parent/Guardian Email:** \_\_\_\_\_

## Consent for Use of Media

I, the undersigned parent/guardian of the participant named above, hereby grant permission to the St Kitts and Nevis Robotics Association (SKNRA) and its representatives to take photographs and videos of the participant during the Robomindset Summer Camp. I understand and agree that these photographs and videos may be used for promotional purposes, including but not limited to:

- Website and social media platforms managed by SKNRA
- Printed materials (brochures, posters, newsletters)
- Press releases and media coverage



## Agreement

By signing below, I acknowledge that I have read and understand the terms of this Media Release Form. I consent to the use of photographs and videos of the participant named above for the purposes described.

**Participant's Full Name (if different from above):** \_\_\_\_\_

**Signature of Parent/Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_