



100 State Street, Suite 352, Montpelier, VT 05602
(802) 223-6263 | dan@pear-vt.org | www.campdaybreak.org

I, _____, give permission for Camp Daybreak and The Vermont Association for Mental Health and Addiction Recovery to record my likeness, including my image and voice. I consent to video and audio recordings being made of me as well as digital images being taken of me during and around the 2018 session of Camp Daybreak.

I agree that Camp Daybreak and The Vermont Association for Mental Health and Addiction Recovery have permission to use these recordings as they see fit in promotional and educational materials.

Although I understand I can revoke my permission as long as I do it in writing, I realize that any such revocation would be prospective and would not apply to any recordings already in use.

I **DO NOT** give permission for Camp Daybreak to use recordings or images of the individual listed above.

Participant Signature: _____

Date: _____

For Parents/Guardians of Participant of Minor Age (Under Age 18):

Parent or Guardian's Name: _____

Parent or Guardian's Signature: _____

Date: _____

Camp Daybreak is a program of The Vermont Association for Mental Health and Addiction Recovery.



PEAR Vermont
People Education Advocacy Recovery

PEAR Vermont is the public face of the Vermont Association for Mental Health and Addiction Recovery, a statewide information and advocacy organization supporting all paths to recovery from substance use and mental health conditions since 1939.