

OLD BRIDGE



Old Bridge Public Library Teen Lock-In Permission and Release Form

**November 14th, 2009
4:30pm-11pm**

Teen's Name: _____ Age: _____ Gender: _____

Name of Parent or Guardian: _____

Address: _____

Phone: _____

Priority will be given to teens who have attended other library events. Please list at least two (2) events sponsored by the OBPL attended by the teen between July 1st, 2009 and November 14th, 2009:

Please provide any additional information about your teen that may be helpful (allergies, medications, dietary needs).

I give permission for my teen to attend the Old Bridge Public Library Teen Advisory Board Lock-In, at the Main Branch on Saturday November 14th. I understand that if my teen is not behaving in a manner appropriate to the objective of the Lock-In, I may be contacted prior to the end time of 11pm. I agree that if contacted to pick-up my teen that I will come to the Library and take my teen home.

I agree not to hold the Old Bridge Public Library and/or Old Bridge Public Library Teen Advisory Board responsible for any accidents or mishaps which may involve my teen. If my teen should become seriously ill or injured, I authorize you to arrange for any emergency medical care needed. It is understood that I (the undersigned parent or guardian) will be responsible for expenses incurred in the event of such treatment.

Signature of Parent or Guardian

Date

Over →

OLD BRIDGE



Release Form for Photography/Audio Taping/ Video Taping

Teen Lock-In
November 14th, 2009

Please read and complete the following statements and information.

Please Check One:

I DO

I DO NOT

...hereby give consent and permission to the Old Bridge Public Library to photograph, audiotape, and videotape me/my child(ren) for use in library promotion, news, articles and/or telecasts and inclusion on the library website(s). I release the Old Bridge Public Library from any liability connected with taking, recording, or publication of interviews, photographs, slides, computer images, videotapes, or sound recordings. I waive all rights to any claims for payment in connection with any exhibition, televising, or other publication of these materials.

I declare I am eighteen (18) years old or older and am legally competent to execute this release.

Date

Name of Guardian (Please Print)

Signature