

**Promotional Consent:** I consent to the use of any videotape, photographs, audiotapes, or any other visual or audio reproduction in which my student may appear by the Arkansas Assemblies of God. I release the picture or voice recording as part of any promotion, recruitment, or fundraising program. *Parent initials* \_\_\_\_\_

Parent/Legal Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

(Required if under 18 years of age)

I verify that the information requested is correct and I agree to conform to all retreat regulations and dress code.

Camper Signature \_\_\_\_\_ Date \_\_\_\_\_