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*P.O. Box 3581, Trenton NJ 08629*

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**NIA PHOTO AND SOCIAL MEDIA WAIVER**

I \_\_\_\_\_, the parent of \_\_\_\_\_ child/children at the Neighborhood Improvement Association's (NIA) Youth Inclusion Initiative Summer Program agree to the following: I understand that my child(ren) whose names are listed may be photographed during trips, activities or program hours. I understand that these photographs may be used in promoting our program, either in print or on the Internet.

The child(ren) are known as:

\_\_\_\_\_

With my signature below I grant permission for my child(ren) to be photographed, or their images recorded for print or electronic use in promoting NIA. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I agree that this form will remain in effect during the term of my child's enrollment. I understand that there will be no payment for me or my child's participation in this release.

Participant Signature

\_\_\_\_\_

Participant Printed Name

\_\_\_\_\_

Parent/Guardian Signature (required if participant is under the age of 18)

\_\_\_\_\_

Parent/Guardian Name (required if participant is under the age of 18)

\_\_\_\_\_

Date

\_\_\_\_\_