

DEPARTMENT OF  
HOMELAND SECURITY  
U.S. COAST GUARD  
ANSC-7020a (10-19)

U.S. COAST GUARD AUXILIARY and  
BOY SCOUTS OF AMERICA  
**Joint Photography/Video/Audio  
Consent Form / Release\***

**PARENTAL RELEASE FOR MINOR CHILDREN (Under 18)**

I, (print name) \_\_\_\_\_, represent that I am the parent of (print child's name) \_\_\_\_\_, with the legal right to grant permission to the U.S. Coast Guard Auxiliary and the Boy Scouts of America to take and publish images and/or sound recordings of my child in news releases, and/or educational and promotional materials in any medium of expression without limitation and without compensation of any kind to me or my child. I understand that all such images and sound recordings shall remain the joint property of the U.S. Coast Guard Auxiliary and the Boy Scouts of America which have the exclusive right to their publication, and that the U.S. Coast Guard Auxiliary may assign the rights granted to it herein to the Coast Guard Auxiliary Association, Inc.

\_\_\_\_\_  
( Signature of parent )

\_\_\_\_\_  
( Date )

\_\_\_\_\_  
( Address )

\_\_\_\_\_  
( City, State, Zip )

**ADULT RELEASE**

I, (print name) \_\_\_\_\_, hereby grant permission to the U.S. Coast Guard Auxiliary and/or the Boy Scouts of America to take and publish images and/or sound recordings of me in news releases and/or educational or promotional materials in any medium of expression without limitation and without compensation of any kind. I further agree that my name and other identifying descriptions may be revealed in descriptive text or commentary in connection with the image(s) and/or recordings.

\_\_\_\_\_ **(Initial here only if permission to identify the subject is granted.)** I understand that all such images and sound recordings are the joint property of the U.S. Coast Guard Auxiliary and the Boy Scouts of America which have the exclusive right to their publication, and that the U.S. Coast Guard Auxiliary may assign the rights granted to it herein to the Coast Guard Auxiliary Association, Inc.

\_\_\_\_\_  
( Signature of parent )

\_\_\_\_\_  
( Date )

\_\_\_\_\_  
( Address )

\_\_\_\_\_  
( City, State, Zip )

***\*This consent form/release is to be used when photographing and/or recording joint U.S. Coast Guard Auxiliary and Boy Scouts of America activities if identifiable images of minors are being recorded.***