

MEDIA CONSENT FORM

THROUGHOUT THE YEAR YOUR PICTURE MAY BE TAKEN OR YOU MAY APPEAR IN VIDEOS CAPTURED BY VARIOUS PHOTOGRAPHERS OR OTHER REPRESENTATIVES OF AMS HAUNTED ATTRACTIONS. BY SIGNING THIS FORM YOU AGREE TO HAVE YOUR PHOTOGRAPH TAKEN OR TO BE PRESENT IN VIDEOS WHICH MAY BE USED IN MARKETING MATERIALS OR RELEASED ON SOCIAL MEDIA PLATFORMS (*i.e. FACEBOOK, INSTAGRAM, TIKTOK, ETC.*).

I CONSENT

I DO NOT CONSENT

NAME: _____

(PRINT)

SIGNATURE: _____

DATE: _____

(IF UNDER 18 PARENT SIGNATURE REQUIRED)

PARENT NAME: _____

(PRINT)

SIGNATURE: _____

DATE: _____