



P.O. Box 72, Duvall, WA 98019
www.Cascadecommunitytheatre.org

Cascade Community Theatre Photography/Video Permission Form

I hereby authorize the use of photographs and/or videotapes of my child/children/ward, or myself as part of the Cascade Community Theatre/Cascade Performing Arts Council promotions. If you do not want your photos or videos published, please notify your instructor on the first day of class.

Signature(s)

Date

Parent or Guardian
