



Participants at workshops, clinics and horse shows at Willaway Farm may have their pictures taken throughout the day. Willaway Farm may wish to use these pictures for future promotion of such programs.

Participant Name: \_\_\_\_\_ (Print)

Participant e-mail (optional) \_\_\_\_\_

I authorize the use of my picture and feedback comments for the purposes of reporting and promoting these activities at Willaway Farm (in most cases feedback is gathered and used anonymously).

Participant Signature \_\_\_\_\_

Date \_\_\_\_\_

Parents Signature (if participant is under 18 years of age) \_\_\_\_\_