

Parental Consent and Media Release Form
 Destination Imagination BC Provincial Tournament April 6, 2024

The participant listed on this form has permission from the parents or guardians listed below to participate in Destination Imagination Provincial Tournament on April 6, 2024, at Seycove Secondary School.

Name of Participant	Age	Gender
Name of Parent/Guardian	Parent/Guardian's Cell Number	
Team Manager's Name:	Team Manager's Phone Number	
School	Team Name	

By signing below, We (I) hereby grant permission for Destination Imagination, Inc., British Columbia Destination Imagination, and Seycove Secondary School to publish images and/or videos of activities that include this participant for the purpose of promoting Destination Imagination®. We (I) understand that the images and/or videos may be used in print publications, online publications, presentations, websites, and social media or other forms of media for the purpose of promoting Destination Imagination. We (I) grant this permission freely and without reservation.

Signature of Participant	Printed Name	Date
Signature of Parent or Guardian	Printed Name	Date