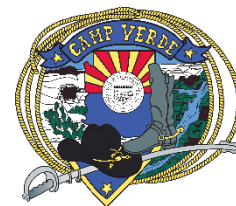


BUILDING SAFETY MONTH – KIDS SUBMISSION & PERMISSION FORM



Participant Information

Child's First Name: _____ Age: _____

Parent / Guardian Information

Name: _____

Email: _____ (optional – see below)

Submission Type (please check one)

- ☐ Completed Activity Booklet
☐ Coloring Page
☐ Both

Certificate Delivery Preference (check one):

- ☐ I would like to pick up my child's certificate
☐ Please email my child's certificate to the email address listed above

Website Feature & Media Permission

Please indicate your selections below:

- ☐ YES, I give permission for my child's first name and submission to be featured on the Town website for Building Safety Month.
☐ NO, I do not give permission for my child's submission to be featured.

Photo Permission (optional):

- ☐ I give permission for my child's photo to be included with their submission.
☐ Photo included with submission.
☐ We will stop by the office to submit the photo in person.

Parent / Guardian Acknowledgment

I confirm that I am the parent or legal guardian of the child listed above and give permission as indicated.

Parent/Guardian Signature: _____ Date: _____

Submission Instructions

Please submit completed forms and activities by email or in person.

Email submissions to: bpr@campverde.az.gov

Office Location: 473 S. Main St., Camp Verde, AZ 86322