OFFICE OF JUVENILE JUSTICE
7919 Independence Blvd.
State Police Building, First Floor
Baton Rouge, LA 70806
Tel. 225.287.7900

LOCATION AGREEMENT

I, _____ am aware and agree that upon my entrance onto the grounds of _____, I have been authorized by the Youth Services to interview, photograph, and/or audio or video record specific material as follows:

_____

_____

_____

_____

I understand that youth and visitors have the right not to be interviewed, photographed and/or video recorded. A release must be signed by visitor, youth or parent/guardian or attorney of youth under the age of 18 who agree to be interviewed, photographed and/or video recorded.

I also understand that I am not authorized to interview, photograph and/or audio or video record outside the above stated parameters for.

Name: _____ _____
Signature Print

Affiliation:_____

Witnessed on this _____ day of _____, 20____, at _____, LA by:

_____
Witness

_____
Title