

Duarte Youth Athletic Club

Release Form for Media Recording

I, the undersigned, do hereby consent and agree that DYAC, its employees, or agents have the right to take photographs, videotape, or digitally record my child and to use these in any and all media, now or hereafter known. I further consent that my child's name and identity may be revealed therein or by descriptive text or commentary.

I do hereby release to DYAC, its employees, or agents all rights to exhibit this work in print and electronic form publicly or privately and to market or sell copies. I waive any rights, claims, or interest I may have to control the use of my child's identity or likeness in whatever media used.

I understand that there will be no financial or other remuneration for recording my child, either for initial or subsequent transmission or playback.

I also understand that DYAC is not responsible for any expense or liability incurred as a result of my participation in this recording, including medical expenses due to any sickness or injury incurred as a result.

I represent that I am the legal parent or guardian of said minor, have read and understand the foregoing statement, and am competent to execute this agreement.

Player's Name

Division/Team

Parent/Guardian (Print)

Phone Number

Address

Signature

Date