



PHOTO/VIDEO RELEASE FORM

I hereby authorize the Loveland Volleyball Club, hereafter referred to as "Club" to use, reproduce, and/or publish photographs and/or video that may pertain to the me and/or the minor child listed below, including our images, likenesses and /or voice.

I understand that this material may be used on the Club's website, in various publications, public affairs releases, recruitment materials, advertisements, and/or for other Club purposes.

I hereby release and hold harmless the Club from any reasonable expectation of privacy or confidentiality for me and for the minor child listed below associated with the images and video specified above. Further, I attest that I am the parent or legal guardian of the child listed below and that I have full authority to consent and authorize the Club to use their likenesses and names.

I further acknowledge that participation is voluntary and that neither I nor the minor child listed below will receive financial compensation of any type associated with the taking or publication of the photographs/video or participation in the Club's marketing materials or other Club publications. I acknowledge and agree that publication of said photos confers no rights of ownership or royalties whatsoever.

I hereby release the Club, its contractors, its employees, its volunteers, its representatives and any third parties involved in the creation or publication of Club publications, from liability for any claims by me or any third party in connection with my participation or the participation of my child listed below.

Authorization:

Printed Name: _____

Printed Minor/Childs Name: _____ Team _____

Parent/Guardian Signature: _____ Date _____

Street Address: _____

City: _____ State: _____ Zip: _____

Relationship to Child: _____ Phone #: _____
