

# South Range Little Raiders

## PHOTO, PRESS, AUDIO AND ELECTRONIC MEDIA RELEASE

NAME OF PARTICIPANT \_\_\_\_\_

NAME OF PARENT OR LEGAL GUARDIAN \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

I, Parent/Legal Guardian of \_\_\_\_\_ hereby consent that photographs and/or motion picture or videotape taken and/or audio recordings made of his/her voice may be used by The South Range Touchdown Club, it's assignees, successors, coaches and volunteers in whatever way they desire, including television, electronic media, and posting on their team website. Furthermore, I hereby consent that such photographs, films, recordings, plates, and tapes are the property of the organization and they shall have the right to sell, duplicate, reproduce and make other uses of such photographs, films, re-cordings, plates and tapes as they may desire free and clear of any claim whatsoever on my part. My signature on this form shall indicate my willingness to consent to the above for the season for any and all events, meetings, games, tournaments and activities that the above listed participant shall participate.

IN WITNESS WHEREOF I have here unto set my hand, in the State of Ohio

Signature \_\_\_\_\_

Date \_\_\_\_\_

(Parent or Legal Guardian named above)