

Lakeview Knothole Little League

Photo Release and Waiver

I _____ ,
(Name)

of _____ ,
(Address)

the parent or guardian (circle one) of the following listed minor(s):

(Player Name)

(Player Name)

(Player Name)

(Player Name)

hereby give my permission to Lakeview Knothole Little League (Local League), to use photographs, voice recordings, or video taken of the above listed minor during the games and events associated with Local League in any manner to help promote the league activities as determined in the sole discretion of the Local League. Such use could include publications, media releases, public announcements, electronic or otherwise, and on league websites or social media pages. I agree that neither I, nor the above listed minor, will receive any compensation if such image appears in any of the manners listed above or other manner that the league deems appropriate. I agree that such image is the property of Local League.

(Signature)

(Date)

[OR]

DO NOT give my permission to Lakeview Knothole Little League (Local League), to use photographs, voice recordings, or video taken of the above listed minor during the games and events associated with Local League.

(Signature)

(Date)