

Harrowgate Athletic Association Release Form

For Photo, Video, Sound, and Web Graphic Presentations

I, _____, hereby grant permission for the Harrowgate Athletic Association, to photograph my child and to record, his/her voice, performances, and appearances, and use his/her picture, photograph, and other reproductions of his/her physical likeness and sound to promote the HAA and recognize outstanding team and individual achievement. I agree that this release grants unlimited distribution, promotion, and exhibition of any video, picture, or sound track.

I have read the above statement and fully understand the meaning. I am signing this form to give my permission to release my child or children's, video, picture, or sound track for reasonable promotional or achievement purposes in brochures, publications, Website, and newspapers in regards to the Harrowgate Athletic Association.

Child's Name _____ Date _____

2nd Child _____ Date _____

Address _____

Best Telephone Number _____

Parent's Signature _____