



# PLAYER PHOTO RELEASE

I, (print name of Parent/Guardian) \_\_\_\_\_ hereby represent that I am the legal Parent/Guardian of the below named participant and I have full legal authority to enter into this agreement on behalf of the below named participant.

I understand that my child(ren) whose name(s) are listed below may be photographed while participating as part of the East Lansing Lacrosse Club, during practices, games, clinics, camps, tournaments, or other activities. I understand that these photographs may be used in promoting the East Lansing Lacrosse Club, either in print or on the Internet.

\_\_\_\_\_  
Player (Print Name)

\_\_\_\_\_  
Player (Print Name)

\_\_\_\_\_  
Player (Print Name)

\_\_\_\_\_  
Player (Print Name)

With my signature below I grant permission for my child(ren) to be photographed, or their images recorded for print or electronic use in promoting East Lansing Lacrosse Club. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I agree that this form will remain in effect during the term of my child's participation with the East Lansing Lacrosse Club. I understand that there will be no payment for me or my child's participation in this release.

\_\_\_\_\_  
Parent/Guardian (Signature)

\_\_\_\_\_  
Date