

Greater Vernon Ringette Association Photo Release Waiver



Name of individual in Photo: _____

Name of parent/guardian _____

Date: _____

Event: _____

I, _____ (print name) the parent/guardian of the above child, give my consent for my child's image to be used in all BC Ringette Association (Ringette BC) media outlets including the Ringette BC website, Facebook page, Twitter page, local, provincial and National newspapers and Ringette BC media releases.

Signature of Parent/Guardian: _____

Date: _____

Witness: _____

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Administrative use only:

Description of photo: _____

Form completed by: _____