



PHOTO / MEDIA RELEASE FORM

BETWEEN

North West Vancouver Ringette Association

AND

NAME: _____

ADDRESS: _____

TELEPHONE: _____

DATE OF BIRTH: _____

AUTHORIZATION TO USE PHYSICAL LIKENESS:

I, *(please print your name:)* _____ do hereby grant to the North West Vancouver Ringette Association, all rights to use my physical likeness in all poses, acts, plays and appearances made by me during the ringette season, including the right to use my name, photographic likeness, including still, moving and voice, and including the right to edit, modify, add to, and/or delete any or all of the material provided by me for exhibition and distribution in all media now known and hereafter and commercial use of all kinds in all countries and territories.

SIGNATURE: _____

DATE: _____

NOTE: If under 18 year of age, signature of a parent or guardian required:

SIGNATURE: _____

DATE: _____