

Photo Release Form (Please Print)

Date _____

Subject's Name _____

I, _____ (insert name of parents/guardians) of _____ (insert name of minor) hereby give the Chippewa Little League Baseball & Softball Association and their legal representatives and assigns the right and permission to publish, my child's photographic image for the specific purpose of publication to their website chippewabsa.com. In giving my consent, I hereby release and hold harmless Chippewabsa, Chippewa Little League Baseball & Softball Association their offices employees, agents and designees from any and all responsibility or liability. I understand that I will receive no compensation, should any photographs of my child be used.

I understand my child's picture and this photo release form will be maintained at ChippewaBSA. I understand I may change or withdraw this release/consent at any time by contacting ChippewaBSA in writing to the above address.

I understand all pictures released to ChippewaBSA will not be returned and will then be destroyed unless told to.

I understand ChippewaBSA has full authority as to which pictures they choose to place on their website. ChippewaBSA is not required nor obligated to use any pictures I submit.

I have read this agreement and understand it.

Signature of Translator

Name of person in picture

Signature (parent/guardian if minor)