



## PHOTOGRAPHY/VIDEOGRAPHY CONSENT AND RELEASE

I, \_\_\_\_\_ consent to my child, \_\_\_\_\_, being photographed and or videotaped by Grimshaw Minor Hockey Association herein referred to as "GMHA". I consent to personal information and photographs submitted to GMHA of my child being used by GMHA for promotional purposes, including public display or publication on the GMHA web site and other social media sites.

I waive my right to approve the use by GMHA of any photograph or photographic image of my child. I release GMHA from any and all claims for loss or damage of any kind arising from the use by GMHA of any photographs or photographic images of my child.

I am signing this Photography/Videography Consent and Release voluntarily and acknowledge that GMHA has not made any representation or promises to me as to the use of any photographs taken.

Signed this \_\_\_ day of \_\_\_\_\_, 20\_\_\_.

\_\_\_\_\_  
(Print Name of Parent/Guardian)

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