



**CONSENT FORM FOR POSTING PERSONAL INFORMATION TO THE
HAWKS ATHLETIC CLUB WEBSITE**

Player Name: _____ HAC Team #: NW _____

By signing this document, I/we consent to the disclosure of personal information (i.e., name, personal photographs, group photographs, hockey statistics, awards or prizes received) about _____ (name of player) by posting it to the website of the Hawks Athletic Club at www.hawksathletics.ca. I/we are aware that by giving this consent, I/we are permitting personal information about our child to be posted to the Hawks Athletic Club website, which can be viewed by anyone who accesses the Hawks Athletic Club website, and that if consent is withheld, this posting will not occur.

I/we further understand that this consent is valid for one year and may be withdrawn by me/us at any time upon written notice. In the event that consent is withdrawn, I/we understand that the information about our child will be removed from the website.

I/we have given this consent voluntarily.

Signed at Edmonton, Alberta on the ____ day of _____, 20____.

***For players under 18 years of age: Signature of Parent (or Legal Guardian):**

Signature of Parent or Legal Guardian *

Witness

*Note: Only persons having lawful custody of the player may sign this consent form as parent or legal guardian. If both parents have lawful custody, one or both may sign.