



Parent Release Form for Media Recording



I, _____, do hereby grant or deny permission to Fort Macleod Minor Hockey Association to use the image of my child, _____, as marked by my selection(s) below. Such use includes the display, distribution, publication, transmission, or otherwise use of photographs, images, and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images.

- Deny permission to use my child's image at all.
- Grant permission to use my child's image.

Unrestricted usage: I give unrestricted permission for my child's image to be used in print, video, and digital media. I agree that these images may be used by Fort Macleod Minor Hockey Association for a variety of purposes and that these images may be used without further notifying me. I do understand that the child's last name will not be used in conjunction with any video or digital images.

Name of Participant: _____

Parent/guardian signature _____

Date _____