

Consent Form

I consent that _____ may use photographs or videos of me, taken on the date indicated below, on their social media tools which includes but is not limited to their Facebook page. I understand that these images and/or videos will not be used for any other commercial purposes.

Name (please print): _____

Date: _____ Signature: _____

(If person(s) in photo/videos is a minor, please indicate below:)

Name of Minor(s) (please print): _____

Parent/Guardian Name (please print): _____

Date: _____ Signature: _____

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