

Photo Consent Form

Athlete Information:
• Name:
• Address:
Phone Number:
• Email:
Consent Statement:
I, the undersigned, hereby grant permission to City of Liberty
Parks and Recreation to take and use photographs of my child for promotional
purposes. This may include, but is not limited to, use in publications, social media,
websites, and other marketing materials.
I understand that my name and identity will be kept confidential unless otherwise
agreed upon. I waive any right to inspect or approve the finished photographs or any
printed or electronic material that may be used in conjunction with them.
Acknowledgment:
I acknowledge that I have read and understood this consent form and that I am signing
it voluntarily.
Signature: (Parent if athlete is under the
age of 18)
Date: