

# Harper Woods Little League

## Photograph Consent Form

**AS THE PARENT/GUARDIAN OF A CHILD/CHILDREN INVOLVED WITH HARPER WOODS LITTLE LEAGUE, WHO ARE LISTED BELOW**

**AGREE TO THE FOLLOWING:**

I understand that my child/children whose name(s) are listed below may be photographed at **HARPER WOODS LITTLE LEAGUE GAMES, PRACTICES AND EVENTS** during the 2018 calendar year. I understand that these photographs may be used in promoting Harper Woods Little League, either in print or on their website.

Parent/Guardian Name	Relationship To Child/Children	
Child/Children Names		
Child/Children Names		
Child/Children Names		
Address		
City	State	Zip

I give permission for my child/children to be photographed, or their images recorded for print or electronic use in promoting HWLL. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I agree that this form will remain in effect during the term of my child's season. I understand that there will be no payment for me or my child's participation.

Parent/Guardian Signature \_\_\_\_\_

Date: \_\_\_\_\_