



## Photo Release Form

The Player Project, LLC has my permission to use my child's photographs/videos publicly. I understand that the images/videos may be used in print publications, online publications, websites, and social media.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_