

Image Release

Westfield United Soccer Club

Player Name: _____ Grade: _____

IMAGE RELEASE

In consideration of the above named athlete, I agree that my minor child/ward's likeness may be photographed or videotaped while participating in the WESTFIELD UNITED SOCCER CLUB Program, its related events and activities and that such image may be published in an outlet used to promote or publicize the sports program.

I HAVE READ THIS RELEASE OF IMAGE RELEASE. I FULLY UNDERSTAND THE TERMS, AGREE TO ABIDE BY THE TERMS, AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING THIS ENTIRE STATEMENT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PARENT/GUARDIAN SIGNATURE

DATE

PRINT NAME