



## PHOTOGRAPHY/VIDEO CONSENT, RELEASE AND WAIVER LIABILITY

Player's Name: \_\_\_\_\_

Gender: M F

DOB: \_\_\_\_\_

Age: \_\_\_\_\_

I hereby grant Forza Sports Academy (hereinafter referred to as the "FSA"), the absolute right and permission to use my child in a photograph, video, broadcast, publish or copyright and use pictures of my child in which he or she may be included in whole or in part, composite or retouched in character or form, without payment or any other consideration.

I hereby irrevocably authorize the FSA to edit, alter copy, exhibit, publish or distribute photographs and videos of me or my child for informational, educational, promotional, or publicity purposes concerning the FSA and its services. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my child's likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photographs or videos.

I understand and agree that these photographs and videos will become the property of FSA and will not be returned. I also understand that the photographs and videos may be used without any further consent or authorization from me.

I hereby hold harmless and agree to release and forever discharge the FSA, its officers, employees, or agents, from any and all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other person acting on behalf of myself or on behalf of my estate have by reason of Authorization.

## RELEASE OF LIABILITY

I \_\_\_\_\_, as natural parent/legal guardian having legal custody of the aforementioned participant do hereby grant permission to Forza Sports Academy to accept my child into their training program.

By signing below, I as natural parent/legal guardian having legal custody of the aforementioned participant agree to be bound by the terms of the photograph/video release attached hereto.

Guardian's Name: \_\_\_\_\_  
( Print)

Telephone: \_\_\_\_\_

Guardian Signature: \_\_\_\_\_  
(father, mother, guardian)

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