

# PHOTO RELEASE FORM

I, \_\_\_\_\_, give Vigo County Youth Soccer Association/Terre Haute Premier the absolute right and permission to use my photograph.

During soccer games, activities and promotions, photographs of activities involving players of VCYSA/THP are sometimes taken and published that may capture your child's participation, directly or indirectly in activities.

These photos may be published through our website, social media pages, news bulletins, billboards, advertisements, news media and television. By agreeing to participate in VCYSA/THP activities, you hereby consent in allowing the publishing and sharing of your child's image to any and all of these platforms. By signing this form, you acknowledge and consent to the reproduction and publication of my child's photograph(s).

I certify that I am 18 years of age or older: \_\_\_\_\_

I certify I am the legal parent or guardian of \_\_\_\_\_ and give my permission for his/her photograph to be used.

\_\_\_\_\_  
SIGNATURE DATE

\_\_\_\_\_  
CITY, STATE, ZIP

\_\_\_\_\_  
PHONE EMAIL ADDRESS