



# EFS MINOR (CHILD) PHOTO/ VIDEO RELEASE FORM

I, \_\_\_\_\_, the parent or legal guardian of

\_\_\_\_\_ [Child] grant \_\_\_\_\_ (coach/ photographer) my permission to use the photographs/videos taken during - **EFS Triathlon Club** for motivational use, demonstrative use and club advertising.

Furthermore, I understand that no royalty, fee, or other compensation shall become payable to us by reason of such use.

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

Parent/Guardian's Name: \_\_\_\_\_

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

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

