

## Minor Photo/Video Consent Form

### *Parent/Guardian Permission*

I give Crank It Volleyball Club permission to take photographs and/or videos of my child. I grant Crank It Volleyball Club full rights to use images resulting from the photograph/video filming, and any reproductions or adaptations of the images for publicity or other purposes to help achieve the group's aims. This might include but is not limited to, the right to use them in their printed and online publicity, social media, and press releases.

I do NOT permit Crank It Volleyball Club to take photographs and/or videos of my child.

### *Minor Permission*

I do NOT permit Crank It Volleyball Club to take photographs and/or videos of me.

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

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

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

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