

Clermont Central Soccer Association

www.CCSAsoccer.org Photo Release

I, _____ (Parent/Guardian) give permission to Clermont Central Soccer Association to use my child's photograph on www.CCSAsoccer.org

I understand the images may be used on CCSA websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use. Players names will not be used. I understand that I may revoke this release at any time or set to expire on _____.

Players First name _____ Players Last name _____

District: _____ Team: _____

Event:

Event Date:

Location:

I understand that by signing this release I authorize CCSA to use my child's photograph on www.CCSAsoccer.org. CCSA is not liable for any damages that may arise from signing this authorization.

Parent or Guardian Print name: _____

Parent or Guardian Signature: _____

Childs First Name: _____

Childs Last Name: _____

Date: _____