



## SNAP Media Release Form

*The Special Needs Athletic Program occasionally uses photographs, videos, and audio recordings of members in its publications and social media. Signing this release grants the program permission to use your child's image and/ or voice recording in its publications and other media outlets.*

I hereby grant permission to the Special Needs Athletic Program to use my image and or voice on its social media and publications without further consideration, and I acknowledge SNAP has the right to crop or treat the photograph, video, or audio recording at their own discretion. I also acknowledge that SNAP may choose not to use the media at this time, but may do so at its own discretion at a later date. I also understand that once my image or voice is posted on the internet, the media can be downloaded. Therefore, I agree to indemnify and hold harmless from any claims the following:

- All members of Special Needs Athletic Program

Special Needs Athletic Program reserves the right to discontinue use of photos, videos, and/ or audio recordings without notice.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

For my minor child as listed below, I grant permission to the Special Needs Athletic Program to use:

\_\_\_\_\_ Photographs      \_\_\_\_\_ Videos      \_\_\_\_\_ Audio Recordings

Name(s) of Minor Children: \_\_\_\_\_

\_\_\_\_\_ Please Identify by first name only      \_\_\_\_\_ Please do not identify by name

Signature \_\_\_\_\_ Date \_\_\_\_\_