Jackets Youth Cheer Social Media Photo Release Form

Athlete's Name: _____ _____
First Last

Date of Birth: _____
MM-DD-YYYY

Phone Number: _____ - _____ - _____

Email: _____
example@example.com

Address: _____

_____

_____ _____
City State

_____
Zip Code

Authorization, Release and Consent

Can we use your Athlete's name?

- ☐ Complete Name
- ☐ First Name
- ☐ Nickname
- ☐ Anonymous

☐ I authorize and grant Jackets Youth Cheer (JYC) to take my photos regarding my experiences with them.

☐ I grant Jackets Youth Cheer to use my photos on Facebook, Twitter, Instagram and other social media platforms.

☐ I allow Jackets Youth Cheer to edit, alter, copy or distribute the photos for social media Advertising and marketing.

☐ I agree that the photos belong to Jackets Youth Cheer.

☐ I understand that I will not receive any monetary compensation.

Guardian Name (printed): _____

Guardian Signature: _____