

Photo Release Form

Subject: UC Baseball Camp

Location: Triana Field

I grant the University of Charleston, coaches and camp volunteers, permission to take photographs and/or videos of my participant and his/her property.

I grant permission to the University of Charleston to use such photographs and/or videos, with or without my participant's name, in a lawful manor for advertisement, illustration, print, publicity, and/or web content.

I have read and understand the above:

Print Name: _____

Signature: _____ Date: _____

Signature, Parent or Guardian: _____

(If under 18)

