

Permission to Use Photo/Video Waiver and Release Form

I,, h	ereby grant Central Valley Water Polo
Safety Advisory Council (CVWPSAC) and its legal	representatives, the irrevocable right
and unrestricted permission to use and publish ph	otographs or video images of my child,
or in which my child may be included, for any purp	ose authorized by CVWPSAC, including
but not limited to: website use, social media, edito	rial publications, catalog and advertising
use. This grant includes the right to modify and reto	ouch the images at the discretion of
CVWPSAC. I understand that the circulation of suc	h materials could be worldwide and that
there will be no compensation to me for this use. F	urthermore, I understand that I will not
be given the opportunity to inspect or approve the	inished products or the advertising copy
or the printed matter that may be used in connecti	on therewith. In granting this permission
to MUSC and its legal representatives, I am fully an	d without limitation releasing it from any
liability that may arise from the use of the images.	
Team:	
Name of Child:	
Signature of Parent/Guardian	
Date	
Print Name of Parent/Guardian	
Date	