

Neshannock Hockey Club  
Authorization and Release  
(Photograph and Visual)

Player's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parents or Legal Guardians: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

I authorize the Neshannock Hockey Club (NHC) board to publish and display photographs and other visual materials of me/my child on the internet, social media and rink bulletin board and to use said photographs and other visual materials in promotional materials or for any other use for the benefit of the organization.

I hereby release NHC, its directors, officers, members, employees, coaches and agents from any and all liability, claims, actions and lawsuits that may arise from the use of said photographs and visual materials. I have fully read this Authorization and Release; I fully understand it and intend to be legally bound by it.

Participant's Signature: \_\_\_\_\_  
(if 18 or older)

Date: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_