

Mr. Todd's Gymnastics Photo Release Form

I _____, (the legal guardian/parent) of _____,
hereby make the following authorizations of the use and reproduction by
Mr. Todd's Gymnastics, or anyone authorized by Mr. Todd's Gymnastics, of
all copies taken without further compensation to me. All photos shall remain
the property of Mr. Todd's Gymnastics. No names, ages, addresses or any
information will be shown in any way, shape or form.

consent

I (check one) _____ to the above for use in the gym facility.

do not consent

consent

I (check one) _____ to the above for use on the web pages.

do not consent

Parent or Guardian's name: _____
(please print)

Parent or Guardian's signature: _____

Date: _____

Office Use Only

<input type="checkbox"/> Gym
<input type="checkbox"/> Web