



# Photo Release Waiver

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## Campers information

Campers Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian contact phone (     ) \_\_\_\_\_ (     ) \_\_\_\_\_

I grant permission to Inclusion Sports Performance, LLC, its agents and employees the irrevocable and unrestricted right to reproduce the photographs and/or video images taken of me, or members of my family, for the purpose of publication, promotion, illustration, training, advertising, or trade, in any manner or in any medium. I hereby release Inclusion Sports Performance Training, LLC and its legal representatives for all claims and liability relating to said images or video.

I grant permission for ISPT to use images of my camper for the purpose of ISPT promotions in print, social media or video.

I prohibit ISPT from using images of camper for the purpose of ISPT promotions in print, social media or video.

Parent/Guardian Signature \_\_\_\_\_ Daytime Phone (     ) \_\_\_\_\_

Parent/Guardian Name (Print) \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_