



EPIC YOUTH CENTER

Image Release Form

In consideration of participation in the EPIC Youth Center and Stillwater Ministries, the undersigned agrees that their likeness, or the likeness of their child/ward may be photographed or videotaped and that such image may be published in an outlet used to promote or publicize the sports program.

(Parent/Guardian Signature) Date

(Print Name)

(Parent/Guardian Signature) Date

(Print Name)

Names of children/wards:

Approved _____