Parental Consent Form

Photography and Website Usage

During the softball season photographs of your child may be taken. Your authorization to use a photo or photos of your child is requested. The child's name will not be used. *Please sign the Photography/Website Usage section to provide the Eastlake Girls Softball League with consent for the usage of photos.*

Consent

Signing this form will be deemed as consent for the Eastlake Girls Softball League to allow your child to participate only as specified below for the 2010 softball season. Should circumstances change during the year, please notify the Eastlake Girls Softball League immediately.

Please complete the following and return it to the Eastlake Girls Softball League or Coach as soon as possible.

I hereby authorize the Eastlake Girls Softball League to allow my child to be *(circle yes or no)*

Photographed for Website usage

Yes	No
Date:	
Name of player (pl	ease print):
Name of parent or	guardian (please print):
Signature of paren	t or guardian:
*Signature of play	er (If 16 years or over):
• .	ent and the player are required for players 16 and 17 ers 18 years of age or older do not require a parental
Division Name	
Coaches Name	

Team Name