



# PHOTOGRAPHY/VIDEO PERMISSION REQUEST FORM

DAY: _____	DATE: _____
TIME: _____	COURT: _____
MATCH: _____ V _____	

I \_\_\_\_\_ of \_\_\_\_\_ (address)

representing \_\_\_\_\_ (team name) wish to take photographs/video during the abovementioned match. By signing the following declaration, I acknowledge that:

- I have permission from the team I represent;
- Photographs/video is for personal use only and will not be used in a manner deemed adverse or defamatory to the subject(s) nor used for any commercial gain;
- No photography/video will be taken by any team who has not provided consent;
- I accept the right to privacy of each individual person;
- Images/footage taken is relevant to the sport/activity;
- Images/footage/sound will not be manipulated in an appropriate manner;
- I will exercise care for the welfare of children in photographing/videoing them.

Signed \_\_\_\_\_

<b>PERMISSION BY OPPOSING TEAM</b>	
NAME: _____	POSITION _____
<b>PERMISSION BY COURT SUPERVISOR</b>	
NAME: _____	POSITION _____