Image Release Consent

In consideration of participation in the AGBC Youth Basketball program, the undersigned agrees that their likeliness, or the likeness of their child/ward, may be photographed or videotaped, and that such images may be published in an outlet or promote or publicize the sports program.

_____	_____	_____
Date	Parent/Guardian (signature)	(print)
_____	_____	_____
Date	Parent/Guardian (signature)	(print)

Names of children:

_____

_____

_____