



PHOTOGRAPHY RELEASE FORM

I (full name):

parent/guardian of (name of child if applicable):

Grant **Ozone Rink** permission to use any photographs and/or video footage for any legal use including but not limited to publicity, copyright purposes, illustration, advertising, web content, social media, coaching and development.

I do allow for myself, child or children to be tagged and/or mentioned across any social media platforms should this be required.

Parent/Guardian Signature:

Date:

Parent/Guardian Name:

Child's Name (if applicable):

Once completed and signed, please email this form back to info@ozonerink.co.uk