



**INFANT SWIMMING RESOURCE LLC**

**photo, video, digital RELEASE FOR MINOR CHILDREN**

I, (print name) \_\_\_\_\_, parent or official guardian of

(child's legal name) \_\_\_\_\_ hereby grant permission to

Infant Swimming Resource LLC, \_\_\_\_\_ a fully certified Instructor, to take, submit to Infant Swimming Resource LLC and use:

- (check all that apply:) →  photographs  
 videotape  
 digital images

of **my child** for use in promotional or educational materials as follows:

- printed publications or materials  
 electronic publications or presentations  
 web site ([www.infantswim.com](http://www.infantswim.com))

I agree that my child's name and identity:

- may be revealed in the following manner \_\_\_\_\_  
 may be revealed ONLY by first name, last initial and age as provided here, \_\_\_\_\_, \_\_\_\_\_. \_\_\_\_\_ months / years  
 may **not be** revealed

in descriptive text or commentary in connection with the image (s). I authorize the use of these images indefinitely without compensation to me. All negatives, positives, prints, digital reproductions and videotape shall be the property of Infant Swimming Resource LLC

(Date)

(Date)

\_\_\_\_\_  
(Signature of Parent or Guardian)

\_\_\_\_\_  
(Signature of Witness Infant Swimming Resource Instructor)

\_\_\_\_\_  
(Address of parent or legal guardian)

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
Phone number ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_@\_\_\_\_\_.