

PHOTOGRAPH RELEASE FORM

l,	, (please print name) do hereby consent and author	rize Dave Prout
Memorial Goalkeeper Camp to use and	d reproduce the photographs taken of	
	, (please print child's name) for promotion of Dave F	Prout Memorial
Goalkeeper Camp.		
	Goalkeeper Camp from any and all claims of damages y other claims based on, arising from, or connected wit e been made to me.	
Parent Signature		_
Telephone #	Date:	
Witness: (please print)		_
(signature)		