

SHOOTING STARS ATHLETICS

EMERGENCY RELEASE FORM

In case of an emergency and I cannot be reached, I authorize the staff of Shooting Stars Athletics LLC to obtain any medical treatment deemed necessary for my child. I further understand and agree that I will be financially responsible for all charges and fees incurred in the rendering of said emergency treatment regardless of whether or not my medical insurance could cover such charges and fees. I hereby give my consent to my child's participation in the activities of Shooting Stars Athletics, and hereby absolve, release, and hold harmless Shooting Stars Athletics and all of its officers, employees, owners, and all other affiliates from any and all liability for any injuries or damages that my child may suffer in connection with the activities sponsored by Shooting Stars Athletics or in which my child may participate.

Parent/Guardian Signature: _____ Date _____

PHOTO/VIDEO/WEBSITE RELEASE & CONSENT FORM

I grant permission to Shooting Stars Athletics, its owners, officers, and or affiliates to use all information supplied to said organization(s) by me in any or all of its publicity without limitation. Said picture(s), photograph(s), image(s), video, voice recordings, information, and any performance or participation in events or projects by me shall be and remain the property of Shooting Stars Athletics for publications such as brochures, promotionals, newsletters, websites, or display boards. I also understand and agree that I am donating this material and that I will not be compensated.

I agree that Shooting Stars Athletics shall be the exclusive owner of all copyright and other rights in and to such photographs, videos, taping, and recordings and will be able to use them forever and throughout the universe, in any manner and in any and all media now known or hereafter in connection with the promotion of Shooting Stars Athletics and related products.

I hereby agree to release, defend, and hold harmless Shooting Stars Athletics and its owners, officers, employees, including any firm publishing and /or distributing the finished product in whole or in part, whether on paper or via electronic media, from and against any claims, damages or liability arising from or related to the use of the photographs, including but not limited to libel, false light, invasion of privacy, rights of publicity, any misuse, distortion, blurring, alteration, optical illusion or use in composite form, either intentionally or otherwise, that may occur or be produced in taking, processing, reduction or production of the finished product, its publication or distribution.

Minor's Legal Name _____ Date _____

I, the undersigned, being the (Parent) (Guardian) of the above name minor, do hereby consent to the above authorization and general release:

Name _____
(Please Print)

Signature _____