ISR FORT WORTH

Digital Media Release Form for Minor Children

I, being the Parent/Legal Guardian of _____, hereby consent to the use of images, depictions, and recordings notated below of the above named minor by Fort Worth Infant Swim, LLC, their assigns or successors at its sole discretion.

I, with my signature below, acknowledge that such photographs, films, recordings, and videos shall be the property of Fort Worth Infant Swim, LLC and that they shall have the right to sell, duplicate, reproduce, and make other uses of such media as notated below as they may desire free and clear of any claim whatsoever.

☐ photographs
☐ videotape
☐ digital images

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

☐ printed publications or materials
☐ electronic publications or presentations
☐ Website (www.isrfw.com)
☐ Facebook and Instagram pages

I agree that my child's name and identity:

☐ may be revealed ONLY by first name, last initial and/or age

☐ **may not** be revealed in any form, however, I authorize, Certified ISR Instructor, Kelsey Strieby, to take photos and videos of my child when necessary for her own educational development and troubleshooting.

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 Fort Worth Infant Swim, LLC.

_____
(Signature of Certified ISR Instructor)

_____
(Signature of Parent or Legal Guardian)

( ) _____ - _____
Phone Number of Parent or Legal Guardian