



Photo/Media Consent Form

Dear Parent/Guardian:

NY Extreme Hoops LLC would like your permission to take photos and videos of your child participating in our basketball programs and events including training, practice, games, clinics, and camps. We randomly take photos and film during these times and would also like your permission to post them on our website www.nyextremehoops.com or any form of advertisement including posters, flyers, banners, facebook, videos, and more!

Please fill out the information below. Thanks for being a part of NY Extreme Hoops!

- Kristi Dini

kdinihoops@gmail.com

914-755-0534

I _____ grant NY Extreme Hoops LLC permission to take pictures of my child and use my child's name, picture, portrait, photograph, image, videos or voice in all forms and media in all manners on their website www.nyextremehoops.com and any form of advertising for the program. I also waive any right to inspect or approve the finished product.

Child's Name _____

Grade/Age _____

Parent/Guardians name _____

Parent/Guardian Signature _____

Date: _____