



Dear Parent/Guardian:

Lafayette Karate Club uses a variety of tools including our website, social media platforms (Facebook & Instagram) and printed materials (posters, flyers, newsletters etc.) to advertise, promote and honor its present and future students.

We would like to request your permission to occasionally use pictures and video of our students at the Lafayette Karate Club dojo, The New Iberia Karate Institute dojo and at any JKA Tournament locations Lafayette Karate Club chooses to participate in. Please select the consent you wish to give for your student and sign the form at the bottom.

Many Thanks!

MEDIA CONSENT FORM

For a Minor with Parent/Guardian

I, [PARENT/GUARDIAN] (the "Consenter"), of _____
(print full name of child)

("My Child") hereby grant Lafayette Karate Club, and their agents, the permission to use photographic portraits, pictures, digital images or videotapes of My Child, or in which My Child may be included in whole or part, or reproductions thereof in color or otherwise for any lawful purpose whatsoever, including but not limited to use in any Lafayette Karate Club publication or on the Lafayette Karate Club website and social media outlets (Facebook & Instagram), regardless of production method or type of media, including, without limitation, digital and analog photography, film and videography (with or without sound).

I consent to waive any right that I may have to inspect and/or approve the finished product or the copy that may be used in connection therewith, wherein My Child's likeness appears, or the use to which it may be applied. I consent to release, discharge, and agree to indemnify and hold harmless Lafayette Karate Club and their agents from all claims, demands, and causes of action that I or My Child have or may have by reason of this authorization or use of My Child's photographic portraits, pictures, digital images or videotapes, including any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in the taking of said images or videotapes, or in processing tending towards the completion of the finished product, including publication on the internet, in brochures, or any other advertisements or promotional materials.

I represent that I am at least eighteen (18) years of age and am fully competent to sign this Release.

PLEASE CHECK ONE OF THE BOXES BELOW THEN SIGN YOUR NAME(S)

CONSENT: I hereby certify that I am the parent(s) or guardian(s) of the above-named child and do hereby give our/my consent without reservation to the foregoing on behalf of My Child.

NON-CONSENT: I hereby certify that I am the parent(s) or guardian(s) of the above-named child and do not hereby give our/my consent without reservation to the foregoing on behalf of My Child.

(Parent/Guardian's Signature)

Date

Parent/Guardian Printed Name

Phone Number