

PHOTO CONSENT FORM

I consent to All Stars Soccer Academy Ottawa to publish and take photos and videos of my child/children. Furthemore, I also consent to these photos being used for any kind of representation and marketing purposes.



Parent/Guardian Name:
Date:
I understand that these images and/or videos will be used only for marketing purposes and therefore grant permission to All Stars Soccer Academy Ottawa to use/and or publish any photos or videos being taken. ☐ Yes ☐ No
Parent/Guardian Signature:
Date:

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