BLOOMINGTON NORMAL SWIM CLUB (BNSC) PHOTO RELEASE FORM

Parent/Guardian Consent for Use of Minor's Image
Swimmer's Name: _____

Date of Birth: _____

Parent/Guardian Name: _____

Phone Number: _____

Email Address: _____

I, the undersigned parent or legal guardian of the minor swimmer named above, hereby grant permission to Bloomington Normal Swim Club (BNSC) and its representatives to take and use photographs, video recordings, and/or digital images of my child for the following purposes:

- BNSC website and social media accounts
- Promotional materials, including flyers, brochures, and advertisements
- Newsletters, emails, and club-related publications
- Local media and news coverage related to BNSC events
- Other lawful purposes related to promoting and supporting BNSC

I understand and agree that:

- These images may be used in print, digital, or online formats without further notification.
- No personal information (such as full names, addresses, or contact details) will be disclosed in connection with the images unless additional written consent is obtained.
- I waive any rights to inspect or approve the final product in which my child's image appears.
- I release and discharge BNSC, its board members, coaches, volunteers, and affiliated organizations from any and all claims related to the use of these images.

I further understand that this consent is voluntary, and I may withdraw it at any time by submitting a written request to BNSC. However, I acknowledge that past images may not be removed from previously published materials.

Please select one:
☐ **I GIVE CONSENT** for my child's image to be used as outlined above.
☐ **I DO NOT GIVE CONSENT** for my child's image to be used by BNSC.

Signature of Parent/Guardian: _____

Date: _____

For questions regarding this release, please contact us at bnsc.boardofdirectors@gmail.com.
Thank you for your cooperation in supporting BNSC!