



2009 – 2010

MEDIA CONSENT FORM

As the parent or legal guardian of (please print players' name)

\_\_\_\_\_ ,

I, (please print parent(s) name) \_\_\_\_\_ give my/our permission to Capital Lady Outlaws Organization to post photos of team events with my child and or family members in them to the team website and/or any other type of publication. Any publication of your child in uniform is subject to the Capitol Lady Outlaws Organization By-laws of conduct.

Parent(s) signature:

\_\_\_\_\_

Date:

\_\_\_\_\_