

Personal Information Release Form for the Seahawk Team 2018-2019

The Seahawk Swim team may share my personal information including phone number and email as listed below with other swim team members. This information will not be shared on social media and may be helpful if family members need to switch swim meet duties or are looking for carpool options.

YES _____ NO _____

Name: _____

Swimmer(s): _____

Email: _____

Phone number: _____

(Once complete, a contact list will be sent out via email at the beginning of the season.)

Photo Release Permission Slip for Seahawks Swim Team 2018-2019

As a parent or guardian of _____, I hereby consent to the use of photographs/videotaping taken during the 2018-2019 swim season for publicity, promotional and/or educational purposed (including publication, presentations or broadcast via newspaper, internet or other media sources).

_____ Yes, I give consent for the Seahawk Swim Team to photography/videotape my swimmer(s) at swim events.

_____ No, I do not authorize the Seahawk Swim Team to photograph my swimmer(s) for any event.

Parent/Guardian Signature: _____ Date: _____

Swimmer(s) Name:

