

Toddler Program Application 2018-19 Season

Name of Child: _____
Last First MI Nickname

Address: _____
Street City State Zip Code

Birth Date: _____ Age: _____ Sex: _____

Parent/Guardian Name: _____ Relationship: _____ Phone: _____

Address: _____ Email: _____

PHOTO / MEDIA RELEASE:

I, _____ (Print Parent's Name), grant permission to the City of Asheville and its legal representatives and assigns, the irrevocable and unrestricted right to use, publish and broadcast my photograph(s), likeness and voice for trade, advertising, and any other purpose and in any manner and medium; and to alter the same without restriction. I hereby release the City of Asheville and its legal representatives and assigns from all claims and liability relating to said photograph(s), likeness and voice.

Signature: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: N/A

I acknowledge that I am over the age of 18

If subject is under 18:

I, _____ (Print Guardians Name), am the parent/legal guardian of the individual named above, I have read this release and approve of its terms.

Signature/Date: _____