

Dayton M.A.D.E.

Photo Release Form

I am the parent or legal guardian of the participant listed below. I give permission for the participant listed below to be recorded, photographed and/or videotaped by or for BlueHalo, Wright State University, or their representatives. Photos or videos may be distributed on social media, organization websites, and in various marketing materials or used for any legal purpose.

I also understand that this permission to use the image, voice and/or likeness of the participant is not limited in time and that I will not receive compensation for granting this permission.

I acknowledge that BlueHalo and Wright State University have no obligation to use the names, images, voices and/or likeness of the participant in any materials, but if they so decide to use them, I waive any monetary right and the right to inspect or approve any such use.

Participant Name _____

Parent or Guardian Name _____

Parent or Guardian Signature _____

Date _____

Please upload this form with the online application (www.ues.com/daytonmade) or email it to DaytonMADE@bluehalo.com.