# GREELEY POP WARNER

# MEDIA RELEASE FORM

By signing below, I, Mr./Mrs./Ms. (*parent/guardian*) authorize Greeley Pop Warner and its photographers and videographers to photograph, video, and post said media to social media platforms of my son, myself & my family.

I understand the photos will be used for informational and instructional purposes and will be used to market Greeley Pop Warner and Pop Warner LLC. I understand the photos may be used throughout the country once shared on social media. I have not been compensated nor will I seek compensation for the photos. I release Greeley Pop Warner from responsibility should a third party violate the terms of this release.

# Parent Signature Date

**Player Name Player #**