



BREWSTER REGIONAL LITTLE LEAGUE

TEAM AND EVENT PHOTO RELEASE

I, _____,
(parent/guardian – print)

parent of _____
(player – print)

Grant permission for the Brewster Regional Little League to include my child in team photos and to photograph my child in games and other League events, with the understanding that the use of such images will be limited to the League's print and electronic media, without the use of player's names.

(parent/guardian – signature)

Date