

2019-2020 Drive Safe Hampton Roads Get It Together Seatbelt Challenge Photo/Video Release Form (Print Information Clearly)

School Name:
Date:
I hereby give Drive Safe Hampton Roads, its legal representatives and assigns, the right and permission to publish photographs/video of my child,
(Printed Name of Student)
These pictures may be used in publications, www.drivesafehr.org, audio-visual presentations, promotional literature, advertising, or in any other manner. I hereby warrant that I am the legal parent/guardian of the above child.
The participating student is over 18: Yes No
Signature (Signature of legal-aged Student OR Parent/Guardian if the student is under age 18)
Printed Parent's Name
Contact Phone Number
Address
City State Zip
Witnessed by(Signature of witness)

This document is intended solely for the use of Drive Safe Hampton Roads and should be treated as a confidential communication.

Please contact Drive Safe Hampton Roads at dshr@drivesafehr.org for any questions.

