



## CONSENT TO PHOTOGRAPH

I agree to allow my child(ren) to be photographed for normal Swim Team purposes, occasional newspaper articles, at Flanagan Memorial Pool hallways, and for posting on Park Board and Swim Team web pages.

I understand that students shown on web pages will NOT be identified by last name.

**Date:** \_\_\_\_\_

**Child's Name:** (Please Print) \_\_\_\_\_

**Child's Name:** (Please Print) \_\_\_\_\_

**Child's Name:** (Please Print) \_\_\_\_\_

**Parent/Guardian**

**Signature:** \_\_\_\_\_