



## Photography Release Form

This letter confirms the agreement between you and R.E.A.L. Field Hockey, Inc. regarding your participation in approved activities in which you may be photographed or videotaped from time to time. For valuable consideration received, you hereby irrevocably grant to R.E.A.L. Field Hockey, Inc. perpetually, exclusively, and for all media throughout the world (including print, nontheatrical, home video, CD-ROM, internet and any other electronic medium presently in existence or invented in the future), the right to use and incorporate (alone or together with other materials), in whole or in part, photographs or video footage taken of you as a result of your participation in approved activities of R.E.A.L. Field Hockey, Inc. You hereby agree that you will not bring or consent to others bringing claim or action against R.E.A.L. Field Hockey, Inc. on the grounds that anything contained in the Property, or in the advertising and publicity used in connection herewith, is defamatory, reflects adversely on you, violates any other right whatsoever, including, without limitation, rights of privacy and publicity. You hereby release R.E.A.L. Field Hockey, Inc., its directors, officers, successors and assigns from and against any and all claims, demands, actions, causes of actions, suits, costs, expenses, liabilities, and damages whatsoever that you may hereafter have against R.E.A.L. Field Hockey, Inc. This agreement shall not obligate R.E.A.L. Field Hockey, Inc. to use the Property or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or exploit the Property. R.E.A.L. Field Hockey, Inc. shall have the right to assign its rights hereunder, without your consent, in whole or in part, to any person, firm or corporation. I understand that these pictures will be accessible to anyone with Internet access and may be used in instructional settings, however, no names of subjects will be published.

AGREED TO AND ACCEPTED this DATE: \_\_\_\_\_

\_\_\_\_\_  
Participant's Name Please Print

\_\_\_\_\_  
Participant's Signature or

Signature of Parent or Guardian if participant is under 18 years old

**Mail to:**  
**R.E.A.L. Field Hockey, Inc.**  
**17 Elmwood Street**  
**Maynard, MA 01754**