

# Event Media Access Waiver Form

By signing below, I grant permission to the organizers to record, photograph, and otherwise capture my image, likeness, and/or voice during the event. I understand that these media materials may be used for promotional and documentation purposes, including websites, social media, and other publications, without compensation to me.

I acknowledge that I am of legal age or have obtained the necessary consent from a parent or guardian.

Full Name

Email Address

Phone Number

Signature

Date

Parent/Guardian Name (if under 18)

Additional Comments