

Photograph and Limited Information Release

I hereby authorize and give full consent to the California Cougars Hockey Club and the Northern California Youth Hockey Association (NORCAL) to publish digitally and display all photographs and written information in which

I (parent's name) _____

My child(ren) _____,

age(s) _____ appear(s).

I agree that the California Cougars Hockey Club and NORCAL may use the photographs for their websites (WWW.CALIFORNIACOUGARS.ORG & WWW.NORCALYOUTHOCKEY.COM) without limitation or reservation, or compensation. Limited information may also be used including players name, date of birth, city of residence and statistical data on the hockey season. Other personal may be requested by your team, or from the club, as the season progresses. Information that you provide will be held confidential, and will be used only to confirm your permission.

Adult Signature _____ Date _____

Print Name _____

Home Address _____

City _____ State _____ Zip _____

Home Phone Number _____

E-mail _____