

MEDIA RELEASE FORM 2025

Utah Ultimate Disc Association

Parent/Guardian Name (if under 18): _____

Participant's Name: _____

I, the undersigned (**or my parent/legal guardian, if under 18**), grant permission to Utah Ultimate Disc Association (UUDA) to use photographs, videos, and other media of me/my child for promotional and educational purposes.

By signing this release, I authorize UUDA to use my/my child's image, likeness, name, and voice in the following formats:

- Social media platforms (e.g., Facebook, Instagram, X, YouTube)
- UUDA website and promotional materials
- Newsletters, flyers, and brochures
- Video recordings for training or promotional purposes
- Any other media related to UUDA programs and events

I understand that:

- No compensation will be provided for the use of these images or recordings.
- UUDA will not include personal contact information (e.g., full name, address, phone number) in any public materials.
- This consent is voluntary and can be revoked at any time in writing by notifying UUDA at [UUDA Contact Email]. Revocation will apply to future media use but will not affect materials already published.

I give permission for UUDA to use the image and likeness of the above named participant as described above.

I do NOT give permission for UUDA to use my/my child's image and likeness in any form.

Participant or Parent/Guardian Signature:

Signature: _____

Date: _____