

Publicity / Photos Release

I hereby authorize and grant permission to **Linden Hall** any of its authorized agents to use my photographic image for any electronic or non-electronic form or media and/or marketing material. I agree that my image may be reproduced, edited and used in whole or in part for any and all media, including, without limitation, print, audio-visual, multimedia, and/or exhibition purposes, in any manner, in perpetuity and throughout the world. I understand and agree that I have no rights to any benefits derived from any such image.

CHECK HERE ONLY IF OPTING OUT OF PUBLICITY/PHOTOS (you still must sign injury release below)

Injury Release

I hereby release and agree to hold harmless **Linden Hall** from any and all claims of any kind which I, my heirs, executors and assigns, may have on account of participating in and/or attending the All In Adaptive Tennis Program. I further waive and release any and all rights and claims against **Linden Hall** and/or its employees for any injury or loss suffered while participating in and/or attending this Program.

I have read this release before signing below, and I fully understand the contents, meanings and impact of this release and waiver.

Participant Name _____

Participant Signature _____

Signature of Guardian _____
(if participant is not 18 or older)

Phone Number/Email _____

Emergency Contact Name _____

Emergency Contact Phone _____

Once completed, please email the form to Melissa Landis at mlandis@lindenhall.org.