Empowered Martial Arts Studio Media Release Form

I,	, do hereby consent and agree that the staff, members and
	powered Martial Arts Studio have permission to take photographs
and/or record video and	/or audio of me/my child(ren) and to use these photographs, audio,
and/or video recordings	for educational, promotional, and/or marketing materials.
or privately, including to or interest I may have to in the photographs, vide	vered Martial Arts Studio the right to exhibit any such works publicly elevision broadcasts or posting on a website. I waive any rights, claim o control the use of my/my child(ren)'s photograph, image, or likeness to, or audio and agree that any uses described herein may be made in additional interest to me.
I confirm that I have rea execute this agreement.	ad and understand the foregoing statements, and I am competent to
Printed Name:	Signature:
	(Or Signature of Parent if Minor Child)
Date:	
*******	*******************
	FOR OFFICE USE ONLY
Received by:	Date:
S	ignature