

Greek Orthodox Archdiocesan District Olympics 2024

May 24 - 26, 2024 Suffolk County Community College, Brentwood NY

Media Consent Form

Church	Program Year
THIS FORM MUST BE FILLED OUT IN ITS ENTIRETY FOR EAC	CH PARTICIPANT.
Media Consent Form	
PRINT Participant's Name:	
Date of Birth:	
Church Name:	
I,(Parent/G	uardian's Name), hereby consent my child's participation in
the taking of photos and/or videos on behalf of th	ne Greek Orthodox Archdiocesan District Olympics. I grant
the right to edit, use, and reuse photos/videos for	r non-profit purposes, including print, online, and on social
media platforms (Facebook, Instagram, YouTube,	etc.).
Parent Approval	
Print Name	PARENT/GUARDIAN SIGNATURE

COACHES & ADVISORS, PLEASE NOTE:

THESE FORMS ARE FOR CHURCHES, NOT FOR GOADO REGISTRATION.
THESE SHOULD BE KEPT BY THE COACHES --- DO NOT GIVE IN WITH PAPERWORK!