



Special Olympics
Ohio
WASHINGTON COUNTY

PHOTOGRAPHY RELEASE

Name _____ (Please PRINT)

I am a Athlete/Guardian Coach Parent

I **give** my permission to be photographed for Special Olympics events and used for personal use, newspapers, and Facebook.

I **DO NOT** give my permission to be photographed for Special Olympics events and used for personal use, newspapers, and Facebook.

(Date)

(Signature of Athlete, Coach or Parent)

Please return to:

Rachelle R. Flesher
Washington County Special Olympics
340 Muskingum Drive
Marietta, OH 45750