



*New Jersey*

USA – Gymnastics

**Athlete Name:** \_\_\_\_\_

**Level / Xcel Division :** \_\_\_\_\_

**Club:** \_\_\_\_\_

**2022-2023 Making Memories Release Form**

I, \_\_\_\_\_, grant permission to use the attached photos in the Making Memories N.J. USA Gymnastics photo album for the 2022-2023 competition season. The album will be available to the public. The album will include the photo, the gym's name, and the gymnast's name.

By granting this permission I release any and all claims relating to the publication of this image (or these images) against N.J. USA Gymnastics organization, or it's related affiliates, officers or volunteers.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_