

Haines Dolphins Swim Team
Video Permission Form

Understanding that the use of video feedback to swimmers can be a valuable teaching tool, I/We give our permission to the Haines Dolphins Swim Team to make video recordings of my child/children listed below:

I/We understand that the video recordings, surface and underwater, will be made from time to time at swim meets and as a regular part of the Haines Dolphins Swim Team swimming and instructional program.

The video recordings will be made by members of the coaching staff, parent or swimmer volunteers, or by an individual contracted by the team or a member of the coaching staff.

I/We understand that this permission may be revoked at any time by sending a letter to the Haines Dolphins Swim Team at PO Box 1367, Haines, AK 99827.

Date _____

Signature/s _____