

Miami Equestrian Club
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REQUEST AND CONSENT TO PHOTOGRAPHY AND/OR VIDEO RECORD

The undersigned hereby authorizes _____ to photograph or video record me as an aid in promoting Miami Equestrian Club activities. I understand that these photographs and/or videos will help our community find out about the opportunities available at the Equestrian Center. I hereby authorize and consent to the above described photography and /or video record.

Client Signature: * _____ **Date:** ____/____/____

**Parents or legal guardians are required to sign for clients under 18 years of age.*

I hereby authorize and consent to the above-described photography or videos being used by the company for marketing or study reporting purposes and that any photographs or videos taken will remain the property of Miami Equestrian Club. If used for any of these purposes, I understand that my identity will be kept strictly confidential, and no names will be released.

Client's Signature: * _____ **Date:** ____/____/____

**Parents or legal guardians are required to sign for clients under 18 years of age.*