



WAUKESHA COUNTY YOUTH HOCKEY ASSOCIATION, INC.
 www.waukeshawarhawks.org



**PLAYER AND PARENT/GUARDIAN AUTHORIZATION TO PUBLISH
 INFORMATION ON THE WAUKESHA COUNTY YOUTH HOCKEY
 ASSOCIATION WEB SITE ON THE WORLD WIDE WEB**

By signing below, I authorize the Waukesha County Youth Hockey Association ("WCYHA") to publish the following information concerning _____ [name of player] on the WCYHA's website on the World Wide Web: player's first and last name, tryout assignments, team assignments, and other team related information including ice schedules, and team and individual photos.

I understand that such publication will give unknown persons unlimited access to this information, and that the WCYHA will not control who has access to this information and cannot regulate how the information is used. The WCYHA shall be authorized to publish this information on its website until I provide the Registrar of WCYHA with written notice revoking this authorization. **Both parent's/guardian's signatures are required if applicable.**

 [Parent's/Guardian's Signature]

 Date

 [Parent's/Guardian's Name Printed]

 [Parent's/Guardian's Signature]

 Date

 [Parent's/Guardian's Name Printed]

 [Player's Name Printed]

 Date

"GREAT KIDS PLAYING GREAT HOCKEY"