



Ramon "RB" Jose Blas Camacho
Mayor of Saipan

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
OFFICE OF THE MAYOR

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**2025 Saipan Mayors Youth Sports Program.
MEDIA WAIVER RELEASE FORM**

MEDIA WAIVER RELEASE FORM FOR MINORS

I, _____ [Parent/Guardian Full Name], am the parent/legal guardian of _____ [Minor's Full Name], hereby grant permission to the Saipan Mayors Office ("Organization") to use, reproduce, and/or distribute visual/audio recordings and photographs of my minor child taken during 2025 Saipan Mayors Youth Sports Program and the activities of the Organization. This includes but is not limited to:

Use in printed publications, newsletters, brochures, flyers, and other printed materials
Use on the Organization's official website and social media platforms
Use in presentations, displays, and exhibits

I understand and agree that:

- The Saipan Mayors Office may use these materials indefinitely and for any purpose deemed appropriate, including promotional and marketing purposes, without any further consent or notification from me or my minor child.
- My minor child's full name may be used in conjunction with these materials, unless I request otherwise in writing to the Saipan Mayors Office.
- I waive any right to inspect or approve the finished product, including written copy or artwork that may be created in connection therewith.
- I release and discharge the Saipan Mayors Office, its employees, volunteers, and other representatives from any and all claims, demands, or causes of action that I, my minor child, or any other person acting on my minor child's behalf may have by reason of this authorization.
- This release applies to both existing and future media, including any media developed by the Saipan Mayors Office.
- This release shall be binding upon me, my minor child, and our respective heirs, legal representatives, and assigns.

I have read this release form and fully understand its contents. I hereby certify that I am the parent/legal guardian of the aforementioned minor child and have the authority to grant the permissions and release set forth herein.

Name of parent or legal guardian (printed) _____

Signature of parent or legal guardian _____

Team Name: _____

Complete address: _____

Name of child(ren) (please print) _____

Date signed _____

OFFICIAL USE:

Received by: _____

Date _____