



MEDIA CONSENT RELEASE

Named Person: _____

Minor Under Age 18 (check one): Yes___ No___

Project: _____

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I have read this entire document, understand the contents, and I have willingly agreed to the above conditions.

PLEASE SIGN ON THE APPROPRIATE LINE.

Named Person's Signature and Email Address

Parent or Guardian Signature and Email Address (if Named Person is a Minor Under Age 18)

Witness

Date