Photo/Video Media Release Form

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Date:	
Address:	
Signature:	
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If the person signing is under age 18, there must be consent by a parent	or guardian, as follows:
I certify that I am the parent or guardian ofabove, and give my consent for the purposes set forth in original releas	, named se on behalf of this person.
(Parent/Guardian's Printed Name)	
(Parent/Guardian's Signature)	(Date)