



# MEDIA RELEASE FORM

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\_\_\_\_\_  
Signature of Adult Subject

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

***If the participant is under age 18, the parent or guardian must also complete the following:***

I hereby approve the foregoing authorization.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip