



## GENERAL MEDIA RELEASE FORM

- 1) I, the undersigned, hereby authorize MacGyver Academy to photograph me or my child, take motion pictures of me or my child, take video footage of me or my child, and/or make electronic sound recordings of me or my child (herein referred to as photographic or electronic reproductions).
- 2) I authorize the use of any such photographic or electronic reproductions of me or my child for any purpose, including, but not limited to Marketing, advertising, educational and other public media as may be deemed appropriate by MacGyver Academy.  
*(I understand that I may be identifiable from such photographic or electronic reproduction)*

Agreed and accepted by:

Participant Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Signature & Date \_\_\_\_\_

I am signing this form as an individual Yes No *(If yes stop here)*

I am signing this form as a representative of a group, and have full authority to grant release for this group Yes No

Name of group \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Phone Number (if different)

### PARENTAL CONSENT

I certify that I am the parent or guardian of the individual above, \_\_\_\_\_, a minor under the age of eighteen years. I hereby agree to assume legal responsibility for his/her authorizations referred to in this General Media Release.

\_\_\_\_\_  
Signature of Applicant's Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address of Parent/Guardian (if different)

\_\_\_\_\_  
City, State, Zip Code