



For Adults

The undersigned voluntarily consents to and gives Child Legacy International, Inc. (Child Legacy) permission to use my photograph(s), likeness, name, story and/or voice, for publicity and communication purposes on behalf of Child Legacy, including without limitation in printed publication and/or on the Internet, and releases Child Legacy or its members from any liability that may result from a use consistent with said release.

Please print name

Address

City/State/Zip

Area code/mobile phone

Signature

Date

For minor child or ward

The undersigned voluntarily consents to and gives Child Legacy International, Inc. (Child Legacy) to use the photograph(s), likeness, name, story and/or voice, of the minor/ward identified below for publicity and communication purposes on behalf of Child Legacy, including without limitation in printed publication and/or on the Internet, and releases Child Legacy or its members from any liability that may result from a use consistent with said release. The undersigned Consenter represents and warrants that I am the parent or legal guardian of the minor/ward and have full authority to consent to this release on behalf of the minor/ward.

Please print name of minor or
ward

Signature of Consenter

Print Name of Consenter

Relationship

Address

City/State/Zip

Area code/mobile phone

Date