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PHOTO/VIDEO RELEASE FORM

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I HAVE READ AND UNDERSTAND THE ABOVE PHOTO/VIDEO RELEASE. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE OR, IF AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENT OR GUARDIAN AS EVIDENCED BY THEIR SIGNATURE BELOW.

PRINTED NAME: _____

SIGNATURE:-----

PARENT/GUARDIAN SIGNATURE:-----

DATE: _____