



## VIDEO RELEASE

I hereby grant permission to Grayson LandCare to use photographs and/or video of me created for the Grayson LandCare's Video Challenge in publications, news releases, online, and in other communications related to the mission of Grayson LandCare

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Signature of Adult, or Guardian of Children under age 18

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Date

## INFORMATION RELEASE

I hereby grant permission to Grayson LandCare to use non-identifying information of mine such as demographic data during the course of Grayson LandCare's project in reporting to funders or in marketing such as publications, news releases, online, and in other communications related to the mission of Grayson LandCare

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Signature of Adult, or Guardian of Children under age 18

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Date

Printed Name (Adult or guardian) \_\_\_\_\_

Student Name \_\_\_\_\_

Address \_\_\_\_\_

Phone (day) \_\_\_\_\_ (evening) \_\_\_\_\_

Email Address \_\_\_\_\_