

IMAGES OF YOUTH 2008 VIDEO FESTIVAL
6:30 pm - Friday, April 25, 2008
Langston Hughes Performing Arts Center, Seattle



PERMISSION/RELEASE FORM

- **EACH STUDENT PRODUCER** INVOLVED IN THE PRODUCTION OF THE VIDEO **MUST** COMPLETE AND SUBMIT A PERMISSION/RELEASE FORM
- If you are younger than 18 years old, please have your parents/guardians complete the permission/release information below
- If you are 18+yrs, please sign the waiver at the bottom of the page.

I grant permission for my son/daughter, _____
(Please **print** student's name)

to participate in the Images of Youth 2008 Video Festival that will be held April 25th, at 6:30 p.m. at Langston Hughes Performing Arts Center in Seattle, Washington.

I understand that if my son/daughter's video is selected for the festival, it will be shown to the audience on the 25th. It may also be distributed for educational purposes by Action for Media Education and may also be linked to the AME website.

I understand that if I have any questions about any of the above information, I can call Jennifer Slack 206-935-4712, or email us at: 2008VideoFestival@gmail.com

Please list a phone number where you can be reached if the festival committee has any questions of you or your student about his/her entry.

Parent/Guardian, please **print** your name Phone# _____

Parent or Guardian **Signature**

Student signature indicates agreement with all Festival guidelines

WAIVER OF PERMISSION

I hereby decree that I am 18+ years of age and therefore considered an adult who is not required to submit a parent/guardian permission form to the Images of Youth Video Festival. My signature below indicates agreement with all Festival guidelines.

Student name **print** Student **signature**

Sponsored by:

