

MONTANA ASSOCIATION OF FCCLA



RELEASE FORM

As parent or guardian of _____ ,
(name of student)

member of the local _____ FCCLA Chapter,
(name of chapter)

I, _____, execute this release for my child's
(your name)

_____ work

_____ voice

_____ name

_____ quotes

_____ photograph or likeness

_____ other

to be used on the Montana FCCLA Web Site and authorize Montana FCCLA to use the same. I understand the Internet is accessible to the general public. Montana FCCLA shall not be responsible for any use of the above by individuals accessing the Internet. If I indicate in writing that I would like any of the above to be withdrawn from the web site, Montana FCCLA agrees to do so within thirty (30) days from receipt of my written request.

I am the parent or legal guardian of the above-named minor and hereby approve the foregoing and consent to the use of the above subject to the terms mentioned above. I affirm that I have the legal right to issue such consent.

I authorize Montana FCCLA's use of the above as stated herein.

Parent/Guardian Signature: _____

Phone Number: _____

Date: _____