

Here and There, Now and Then

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HEIGHTS **ARTS**

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Consent Release

Participant (please print):

Name: First, Last e-mail (____) _____-_____
Preferred Phone: (cell / home)

Address: Street City State Zip Parent full name (if participant is under 18)

I give permission for Heights Arts to display and publish and my work in any Heights Arts publication, including our student work anthology, website and blog, using my first name, last initial, and age (if under 18). I understand and consent to the editing of my work for display and publication as long as my original purpose and meaning are respected. I understand that I still retain sole ownership and copyright to my work and I may use it for other purposes.

I give permission to Heights Arts to photograph/ videotape me/my child while s/he participates in program activities. I understand that the photographs/ videotapes may be used in presentations, posters, brochures, advertisements, and on the Heights Arts website and other promotional materials on behalf of Heights Arts. All such photographs / videotapes will be maintained as the property of Heights Arts.

Participant Signature: _____ Date _____ AGE: _____

Parent/Guardian
Signature (if participant is under 18): _____ Date _____

The contact information provided here is for Heights Arts only and will not be sold or provided to any other organization.

Please indicate the city and country (or cities and countries) of origin that are referenced in your project:

City _____ Country _____

City _____ Country _____

City _____ Country _____

City _____ Country _____