

## **New Jersey Destination ImagiNation Scholarship Media Release Form**

Each student applying for the New Jersey Destination ImagiNation scholarship fund must fill out a copy of this form for anyone appearing in the presentation and mail it with the video/CD. Students must also have a parent or guardian sign.

Your signature on this form permits the organizers and sponsors of the New Jersey Destination ImagiNation program to use Videotapes/CDs, names and photographs of participants in public showings.

***I hereby consent to New Jersey Destination Imagination, Inc. to use my picture for publicity purposes.***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Signature : \_\_\_\_\_ Date: \_\_\_\_\_

I, the undersigned, being the parent or guardian of the above minor, do hereby consent to, and agree to be bound by, the above release.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_