

Quest 2010

PHOTOGRAPHIC PERMISSION FORM

By signing below, I give permission to the Page County Department of Recreation and/or Sharon L. Sampsell and /or the Quest for the Stars designated photographer to photograph me during Quest 2010 activities and events, including but not limited to public appearances, competitions, Showcase event, Finale and all practices; and/or during other activities of the Quest 2010 program.

I understand that this photographic image will be used in the promotion of the Quest 2010 program including the Showcase Event, Competitions, Finale, public appearances and practices and Contests; and in general promotion for the Quest for the Stars program to include but not limited to flyers, brochures , web postings and CD recordings.

Signed: _____
Contestant's Full Legal Name

Date: _____

Signed: _____
Signature of Parent/Legal Guardian (If under 18 years of age)

Date: _____