Wisconsin High School Forensic Association

Image and Media Release

Parent/Guardian Name (PRINT)



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Student N	lame (PRINT)	Signature of Student			Date (mm/dd/yy)	
If under 18	3, parent or legal guardian must s	ian.				
I am the p	arent/legal guardian of the persoer which either I or above student	n signing the Release and I h	=	_		S

Signature of Parent/Guardian

Date (mm/dd/yy)