

GENERAL MEDIA RELEASE FORM

**NORTH COUNTY TEEN COURT**

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

- 1) I, the undersigned, hereby authorize **North County Teen Court** to photograph me, take motion pictures of me, take video footage of me, and/or make electronic sound recordings of me (herein referred to as photographic or electronic reproductions).
- 2) I authorize the use of any such photographic or electronic reproductions of me for any purpose, including, but not limited to educational and other public media as may be deemed appropriate by **North County Teen Court**. (I understand that I may be identifiable from such photographic or electronic reproduction)

Agreed and accepted by:

Print Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Signature & Date \_\_\_\_\_

I am signing this form as an individual  Yes  No

**PARENTAL CONSENT**

I certify that I am the parent or guardian of the individual above, \_\_\_\_\_, a minor under the age of eighteen years. I hereby agree to assume legal responsibility for his/her authorization referred to in this General Media Release.

\_\_\_\_\_  
Signature of Applicant's Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address of Parent/Guardian (if different)

( ) \_\_\_\_\_  
Phone Number (if different)

\_\_\_\_\_  
City, State, Zip Code