



Wei Wai Kum First Nation

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MEDIA CONSENT FORM

CAMPBELL RIVER INDIAN BAND YOUTH GROUP

Child/ren's Information

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Permission Statement

1. I give permission to release my child/ren's name and photograph to the news media for publicity of Campbell River Band youth activities. I give permission for photographs of my child/ren to be used in Campbell River Indian Band printed and website materials.

Parent or guardian signature _____ Date _____

2. I do NOT give permission to release my child/ren's name and photograph to the news media for publicity of Campbell River Indian Band youth activities. I do NOT give permission for photographs of my child/ren to be used in Campbell River Indian Band printed and website materials.

Parent or guardian signature _____ Date _____