



**MEDIA RELEASE**

I, \_\_\_\_\_, hereby give  
*(Please print name of parent or legal guardian if child or children are under 18 years old)*

consent for myself and my children to be filmed, interviewed, audio taped, videotaped, photographed by the media (print and broadcast), and employees, agents or servants of the Little Geeks Foundation for promotional purposes.

Name of Child: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Home telephone number: \_\_\_\_\_

\_\_\_\_\_  
*(Signature of Parent or Guardian if child or children are under 18 years of age).*

\_\_\_\_\_  
*(Date)*