

# CRAVEN DANCE STUDIO

## Media Release

\_\_\_\_\_ I Grant

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Permission for Craven Dance Studio to use my child's name,  
photograph, slide, audio / or video recording in its media releases  
(including newspaper articles, studio publications, presentations and / or  
web pages etc.

\_\_\_\_\_  
Childs Name (Please Print)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Please return completed form to Craven Dance Studio

Thank you,

Barb Craven

(over)