



“The Ecumenical Choir of the Capital Region”

Members Media Release Consent Form

For purposes of advertisement and recognition of our choir programs, I hereby grant permission to Festival Celebration, Inc. to use my name and my picture on their website and in their promotional materials. Any quotes I make, may also be used. I understand that no other personal information such as an address or a phone number will be used.

Date: _____ Signature: _____

Printed name: _____

Signature of parent or guardian if choir member is under age 18

	<p><i>Welcome to the</i></p> <h1>Festival Celebration Choir!</h1> <p style="text-align: center;">www.festivalcelebrationchoir.org</p>		
Name:		Birthday (mm/dd):	
Address:			
City:		ZIP:	
Email address:			
Voice part (SATB):		Work or cell phone:	Home phone:
List any other groups you are involved in:			