

MEDIA RELEASE FORM

I consent to allow the **New Jersey Council of Figure Skating Clubs** to use photos of my son/daughter and issue a press release regarding any academic or skating achievements.

Date	PRINT Name of Skater
PRINT Name of Parent/Guardian	
SIGNATURE of Parent/Guardian	
Other Information:	
CITY/TOWN	COUNTY
NEWSPAPER	
	HIEF
PHONE CONTACT	
If more than one periodical	
NEWSPAPER	
REPORTER or BUREAU CHIEF	
PHONE CONTACT	
Please include a 5X7 color [head and shoulders portrait] photograph or digital file in a	
ing or gif format	