

Student Video Contest Photo Release Form - All Ages

Participants Under A	\ge 18:	
I,		
Parent/Guardian's Author	rization:	
Name:	Signature:	Date:
Participants Over Age 18: I,		
Participant's Authorization		
Name:	Signature:	Date:
Submit this Photo Releas	e form to stormwater@bendoregon.	gov.
City of Bend Project Cool		Date Received

