



An arts program
for homeless children

Teen Volunteer Release Form

I grant permission for my teen(s), as listed below, to volunteer for the DrawBridge arts program.

Teen's Name

Birthdate

_____	____/____/____
_____	____/____/____
_____	____/____/____

I have further decided that:

DrawBridge may use any artwork my teen(s) create in the program for public relations purposes:

Yes No

DrawBridge may use images (still and moving) of my teen(s) for public relations purposes:

Yes No

Name of parent: _____

Relationship: _____

Signature: _____

Today's Date: ____/____/____

Telephone: _____

Other Telephone: _____