



## Release Form for Electronic Display of Original Work

I, \_\_\_\_\_, give my permission for my work to be electronically displayed and produced by the District. The work to be displayed is:

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Student's or Employee's signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of student's parent or guardian \_\_\_\_\_

Home Address \_\_\_\_\_

Date \_\_\_\_\_ Home Phone Number \_\_\_\_\_