



DECLARATION AND RELEASE FORM

AUTHORIZATION FOR USE OF GREEN APPLE SCHOOL PROGRAM RECEIPIENT PHOTOGRAPH

CHILD'S NAME _____ (please print) PARENT/ LEGAL GUARDIAN NAME _____

I, as indicated above, confirm that I am the parent or legal guardian of _____ . In consideration of my child's class or school being selected as a "Green Apple School Program" grant recipient and the obligation for the class or school to provide photographs of its project, I authorize use of photographs of the project in which my child is depicted in any of the following vehicles as outlined in this document, and

HEREBY:

1. Declare that I give authorization for use and display of my child's image for the purpose herein described; and.

2. Give consent to Metro Richelieu Inc., its affiliates and their advertising, marketing, and promotional agencies, to the use of my and my child's name and/or the project photograph and/or the display of my child's image in the photograph in print or web, for advertising purposes of the Green Apple School Program, in print media or web for an undetermined length of time without compensation or payment of any kind.

SIGNATURE _____

DATED THIS _____ DAY OF _____ 20____

FOR CLASS/SCHOOL USE ONLY: The project leader must complete the fields below and send the form to Metro Customer Care Department by fax at number 514-356-5826 no later than 30 days after the project is completed or by June 1, 2010. Don't forget to also submit your summary report outlining the final project with photos on greenapplegrants.ca

School Name		Project Number	
City			
Project Name			
Project leader name			
Project leader phone number			
Description of the photo			
Which child is it on the photo?			