



AGREEMENT REGARDING PUBLICITY

Name of Performer (print clearly)

Name of Parent (if the performer is under 18 years old, print clearly)

By signing this document, I agree that PhMTA may use any photography and/or video of myself or my child from PhMTA's events, made with appropriate captions including their name, in publications, on the PhMTA website, or in news releases.

PARENT'S SIGNATURE

PERFORMER'S SIGNATURE (IF AGE 18 OR OLDER)
