



KYLE DINE VIDEO RELEASE FORM

**CONSENT TO USE PHYSICAL LIKENESS, PERFORMANCE, AND VOICE
FOR CHILDREN UNDER 18 YEARS OF AGE**

Permission is hereby granted to Kyle Dine to use the physical likeness, performance, and/or voice of _____ as follows:

Video clip in support of Kyle Dine’s Kickstarter video campaign which will be seen online (YouTube) and used as a resource to help promote an upcoming educational resource about food allergies.

Printed name of Child

Printed name of parent/guardian

Signature of parent/guardian
(required for YAP members under 18 years old)

Date

Please complete, sign, and date this form, and return Kyle Dine by fax (815-301-1793) or e-mail (kyledine@gmail.com). Please keep a copy for yourself.