



Institute of Art and Design  
Misrah L-Ghonoq, Mosta  
Tel: (+356) 2141 2783

# **CHILDREN RELEASE FORM**

Project name:

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Student: \_\_\_\_\_

By signing the form below, you give your permission, without further consideration or compensation, in whole or in part, for all Audio Visual footage and/or photographs made of your child of name \_\_\_\_\_, and/or recordings of the child's voice, and/or written extraction done during this project to be used by the student and MCAST solely for educational purposes. This may include publications, exhibitions, broadcasting, World Wide Web, showreels, and presentations.

By giving your permission, you do not give up any copyright or performance rights that you may hold.

I agree to the uses of these materials described above, except for any restrictions, noted below.

Name (please print):

\_\_\_\_\_

Signature:

\_\_\_\_\_

Date: \_\_\_\_\_

Researcher's signature:

\_\_\_\_\_

Date: \_\_\_\_\_

Restriction description:

\_\_\_\_\_