

## Release Form

I, being of legal age, do hereby consent to the use of my name, quotations, photography, video footage, audio taping, or any film footage of myself, by the Government of Canada. I understand that all the rights belong to the Government of Canada and that my efforts will not give rise to any financial compensation.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Date (dd/mm/yy): \_\_\_\_\_

