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By signing below I acknowledge that I have read and understand this Publicity Authorization and Release and I agree to its provisions.

Name (Please Print)		Telephone
Address	City	Zip Code
Signature		Date Signed

<sup>\*</sup> This form for use by adults only (persons 18 years of age or older). For students 17 years of age or younger, the appropriate form is the "Los Angeles Unified School District Parent/Guardian Publicity Authorization and Release"