

Catholic Kids4Kids Book Contest

Parental Consent Form

Parent or Guardian Full Name: _____

Child Full Name: _____, Age: _____

I acknowledge that I am the parent or legal guardian of the child listed above. By signing this parental consent form, I agree to allow the drawing or writing submitted by my child to be published in an independent book. I release any rights I, or my child, have to this work of art or writing. I acknowledge that I have read this agreement and that I freely volunteer the work to be used. The publisher shall be bound by my selection below regarding attribution of the work submitted here.

___: I wish my child to remain anonymous

___: I consent to attribution in the following format (John D., Age, Georgia)

Signed:

Date:

Email or Phone # to be contacted in the event your child wins a free copy of the book:

Email: _____ Phone: _____