

## Foundation for Impact on Literacy and Learning Consent & Release

I hereby grant, for myself or behalf of the child named below, to the Foundation for Impact on Literacy and Learning Inc. ("FILL") and its affiliates, successors and assigns the right to publish any testimonial statement, name, video image and/or photo of myself or my child in any educational, training, advertising and/or promotion relating to FILL or any of its programs and to reproduce and distribute copies of such materials.

I waive any right to inspect or approve the content of any such material or copy. I further waive, discharge and release to FILL, its affiliates and subsidiaries, and their respective officers, directors, employees, agents, successors and assigns, or any person acting under their authority, from any and all rights, claims, causes of action or objections that I or my child may have, or that may subsequently accrue to me, as to any use that may be made of any statement, name, video image and/or photo by FILL

I agree and covenant that I will not make any claim nor file suit or authorize anyone else to file suit in connection with any claims that I may have against FILL or any of its directors, officers, employees, agents, successors and assigns arising out of any injury to myself or my child as a result of FILL's use of any testimonial statement, name, video image and/or photo.

I am over 18 years of age or the parent or guardian of the person listed below. I have read the foregoing consent form and release, and I warrant that I fully understand its content.

Student's name: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Dated: \_\_\_\_\_