



## MEDIA AND INFORMATIONAL RELEASE FORM



### Hawai'i 4-H Youth Development Program

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**Name of Participant (please print):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Parent's signature if participant is under 18 years of age)

**Name of Parent (please print):** \_\_\_\_\_ **Date:** \_\_\_\_\_

Thank you.

*"To Learn By Doing"*