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I certify that I am at least 18 years of age and that I am competent to contract in my own name. I have read this release before signing below, and I fully understand the contents, meaning, and impact of this authorization and release.

SIGNATURE

Date Signed

Printed Name

Guardian's Consent

I certify that I am the parent or guardian of _____, and on behalf of this person named, I grant permission according to the terms of this authorization and release set forth above.

SIGNATURE – Parent / Guardian

Date Signed

Printed Name

Note to DHS Staff:

Signed copy is to be filed with project materials. If materials are to be used in a publication or on the DHS Internet, send the signed document to your Records and Forms Manager for appropriate filing.