



Wisdom Steps Media Release Form

TO: Wisdom Steps Organization
4476 Cedar Island Drive
Eveleth, MN 55734

In consideration of my appearing on one or more programs or articles which you are preparing: I hereby authorize the Wisdom Steps Organization, in perpetuity, to print, record, distribute, and use for film, tape or otherwise, my name, likeness and performance on such programs, for television, broadcasting over stations throughout the world, for internet display, for audio-visual purposes and for general educational purposes and without any compensation or additional consideration to me. I represent that I am of full legal age and competent to make this agreement.

Program and/or Series: _____

Name (Print or type): _____

Signature: _____

Co-Signer for Minor: _____

(Parent or Guardian)

Date: _____