

**The Fight for Life Film Clip Shoot**

**Participation / Release Form**

MUSIC VIDEO - **Filming January 15<sup>th</sup> 2012**

**numbers are limited - send back form asap !!!!**

Name -----

Email -----

Mobile -----

Name -----

Age -----

Daughter/Son-----

I hereby give my consent to participate in the Filming of the RoCan Ovarian cancer awareness DVD

I hereby give permission to use my daughter/Son in the filming of the DVD

Signed -----

Witness -----

**Yvonne Moon OAM RoCan** -----

**Dated** -----