

## Publicity Release

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I certify that the statements I have made are true and of my own personal knowledge.

\_\_\_\_\_  
Participant Name (Please Print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Home Telephone Number

\_\_\_\_\_  
Other Telephone Number

I have read and understand the above and acknowledge that I am waiving certain legal rights in exchange for participation in the Digital Works program.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Digital Works Representative

\_\_\_\_\_  
Date