



## Child Information and Permission

Legal Guardian's Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number(s) \_\_\_\_\_

Email Address \_\_\_\_\_

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

The above has my permission to participate in the "Tales to Tails" program sponsored by the Friends of the Norfolk Public Library. By signing the release you are:

- 1.) Giving the Norfolk Public Library permission to use the above child's name and image in promotional materials and media;
- 2.) Waiving all liability towards the Norfolk Public Library and Friends of the Norfolk Public Library; and
- 3.) Acknowledging that you have received, read and understood the guidelines and agree to abide by them.

Signature of Legal Guardian

Date



*This program is sponsored by the Norfolk Public Library and the Friends of the Norfolk Public Library. All dogs have been trained and are certified Therapy Dogs.*

