

INNOVIA FOUNDATION

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**INNOVIA FOUNDATION PHOTO CONTEST PARENTAL CONSENT FORM**

<b>INFORMATION</b>		
I am the parent or legal guardian of the minor child whose signature appears below, and I hereby give my consent to the minor entering the Innovia Foundation's Second Annual Reimagining Communities photo contest. I have read and accepted Innovia Foundation's rules on my and my child's behalf.		
PARENT OR LEGAL GUARDIAN SIGNATURE:	DATE:	
YOUTH SIGNATURE:	DATE:	
<b>PARENT OR LEGAL GUARDIAN INFORMATION</b>		
PARENT OR LEGAL GUARDIAN NAME:		
PARENT OR LEGAL GUARDIAN ADDRESS:		
CITY, STATE, ZIP CODE:		
PARENT OR LEGAL GUARDIAN PHONE NUMBER:	PARENT OR LEGAL GUARDIAN EMAIL ADDRESS:	
CHILD'S NAME:	AGE:	DATE OF BIRTH (MM/DD/YYYY):
CHILD'S ADDRESS IF DIFFERENT FROM PARENT OR LEGAL GUARDIAN:		
CITY, STATE, ZIP CODE:		
Thank you for your child's participation. We are excited to see their unique perspective on Reimagining Our Communities.		
Submit photographs by visiting <a href="http://innovia.org/photocontest2021">innovia.org/photocontest2021</a> and following the instructions.		