

2017 TASL
Bookmark Contest
www.tasltn.org

***“Because school
libraries empower
students”***



Student's Name (PLEASE PRINT) _____

Student Grade _____ School _____

Address _____ City/State _____

Zip _____ Librarian name & email _____

Local newspaper & address _____

Student work/pictures of the student may be used for news release, photographs, videos, audio recordings, and the TASL webpage for the purpose of publicizing the TASL and school libraries across the state.

I (we) give our permission to the TASL to use my child's name and intellectual property and/or photograph or likeness for publicity and the use of statements/bookmarks made or attributed to my child relating to this bookmark contest and grant to TASL any and all right to said use without further compensation. It is my (our) understanding that my signature below releases TASL from any financial or legal responsibility for the use of this media relations/promotional material.

Signed _____ Date _____

Relationship _____

Please print parent or guardian name(s) _____