

# BOOKRAPT™

THE BAY OF PLENTY CHILDREN'S LITERATURE ASSOCIATION INC

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## AUTHORISATION FOR ELECTRONIC MEDIA RELEASE FOR STORY

Author to complete.

I, \_\_\_\_\_, authorise Bookrapt to publish my story.

I understand that the story will appear on the Bookrapt website on the "Kids' Work" page. I understand that I will not be paid for publication of this story on the Bookrapt website. I understand that Bookrapt will not sell, duplicate, reproduce, or make other uses of the story.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## STORY ELECTRONIC MEDIA RELEASE FOR MINORS

Parent/Guardian to complete.

FULL NAME OF MINOR:

\_\_\_\_\_

FULL NAME OF PARENT/GUARDIAN:

\_\_\_\_\_

ADDRESS:

\_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

As the Parent/Guardian of the above named minor I hereby consent that their story may be published on the Bookrapt website.

SIGNATURE OF PARENT/GUARDIAN:

\_\_\_\_\_

DATE: \_\_\_\_\_