



Release Form for Media Recording

I, the undersigned, do hereby grant or deny permission to GHI ELECTRONICS, LLC to use the image of myself, _____, and/or my child, _____, who is _____ years old, and in the _____ grade. Such use includes the display, distribution, publication, transmission, or otherwise use of photographs, images, and/or video taken of me or my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the GHI ELECTRONICS, LLC or BrainPad website.

- Deny permission to use my or my child's image at all.
- Grant permission to use my or my child's image.

Signature: _____ Date _____

Please make a copy of this form for your own records and bring the original to your first class. You can also mail or fax the form to:

GHI ELECTRONICS, LLC
501 E. Whitcomb
Madison Heights, MI 48071
FAX: 248.397.8890

If you have questions, contact NICOLE HILL at nicole.hill@ghielectronics.com or 248.397.8856.

