



Nishnawbe Aski Nation

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100 Back Street, Unit 200 Thunder Bay, ON P7J 1L2
Tel: (807) 623-8228 Fax: (807) 623-7730

PHOTO RELEASE FORM

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Name of Participant (please print): _____

Name of Parent/Guardian (please print): _____

Parent/Guardian's Signature: _____

Date: _____
