

Communications Release

I acknowledge TTF staff members and/or volunteers may contact the Participant to discuss their experience at the event, encourage, pray for, or receive general updates.

I hereby give my full consent to TTF to contact the Participant after the event directly through the following means:

_____ Telephone

_____ Text Messages

_____ Email

_____ Please maintain contact through the parent/guardian only

_____ I do not give permission for TTF staff to contact the Participant

Name of Participant: _____

Address: _____ City/State/Zip: _____

Telephone: _____ Email: _____

Signature of Parent/Caretaker _____ Date _____