

## Talent release form

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

Signed: \_\_\_\_\_

Witness: \_\_\_\_\_

Date: \_\_\_\_\_

(if under the age of 18)

Guardian: \_\_\_\_\_

**Please attach a copy of the image with relevant talent identified and return to:**  
headspace, P O Box 1126, Hervey Bay, QLD, 4655