

## 2024 SONS & DAUGHTERS SCHOLARSHIP PROGRAM

## **PUBLICATION RELEASE FORM**

Parent Name (print - if applicant is under 18)	Parent Signature (physical signature required if applicant is under 18)
Applicant Name (print)	Applicant Signature (physical signature required)
·	on and any of its related entities to identify me as a scholarship oblications or other media outlets promoting the scholarship program if I Daughters scholarship.
recipient in any press releases, websites, pu	ion and any of its related entities to identify me as a scholarship iblications or other media outlets promoting the scholarship program if I Daughters scholarship. I grant permission for my name, information,
Please check only one box and sign the forn for the award.	n below. Your decision has no impact on the decision-making process
•	pportunity to publicly announce the award recipients and would like you indicate consent. We will only disclose your information upon your and wal as indicated below.

Completed form should be submitted by March 15, 2024 to:

The Brunswick Sons & Daughters Scholarship Program
PO Box 648
Naperville, IL 60566
Fax: 630-428-2695

Email: info@brunswickscholarships.com