

Authorization Form for Minor Reviewer

am the Parent / Legal Guardian of the minor who is currently years of age. I have read, unde the Readers' Favorite LLC Reviewer program, includin	erstand and agree with the information regarding
hereby authorize Readers' Favorite LLC permission to books provided by Readers' Favorite LLC, and grant Re boost said reviews in any capacity they deem approprise books chosen by said minor will be my responsibility.	eaders' Favorite LLC permanent rights to use and
n addition, I authorize Readers' Favorite LLC to post be minor on their website.	piography information that I will supply about said
Please select one of the following:	
I will provide Readers' Favorite LLC with a pictu	re of said minor for their website.
I DO NOT want a picture of said minor on the value in the names of 3 public authors whose work said minor from one of those authors to represent said minor, are author's picture from the biography of said minor.	enjoys. Readers' Favorite LLC will chose a picture
Print Name of Parent / Legal Guardian	Relationship to Minor
Signature of Parent / Legal Guardian	Date
Please print and complete this authorization form, the or fax to (800) RF-REVIEW. Thank you!	en scan and email to support@readersfavorite.com
https://ReadersFavorite.com :: support@	readersfavorite.com :: (800) RF-REVIEW