



Biography Consent Form

My signature below confirms that I authorise the author (insert full name of the author) _____

to write my biography in accordance with the Entry Conditions of the Stories of Life Competition (2018). I declare that the information I give will be true and accurate to the best of my knowledge.

I agree that this biography may be submitted as an entry to the competition and I give permission for the story to be published by the Stories of Life sponsors in any media, according to their own discretion.

I waive any rights of privacy I may have in relation to any information disclosed and I share my experiences of God freely for the interests of others.

I further trust and expect that Stories of Life will ever act in my best interest and in accordance with the highest tenets and standards of the Christian faith, in respect of my biography.

Signature:

Name:

Date: