

NORTH CAROLINA AMBER ALERT

RELEASE OF INFORMATION FORM

The undersigned hereby authorizes full disclosure of all records concerning my child, _____, to the Center for Missing Persons (hereinafter referred to as the Center) and its agents and the law enforcement agencies investigating this case and their agents. I also agree that such information may be reviewed and stored provided it is done so in a confidential manner and I do so regardless of any agreement I may have made to the contrary with any other individual or entity to whom my child's information is released or presented. I also agree to release from liability any person or entity who releases such information pursuant to this investigation. For the purpose of this release, information shall include but is not limited to all documentation and photographic images as well as the spoken word.

A photocopy or electronically transmitted facsimile of the release form will be valid as an original thereof, even though it does not bear an original representation of my signature.

I hereby agree to these provisions and willingly sign my name below.

Print or Type Name _____
(Last) (First) (Middle)

Current Address _____
(House Number and Street) (Apt. or Lot Number) (City, State, Zip Code)

Signature _____



I hereby agree the information I have provided to the Center or its agents or designees to be truthful, factual, and correct. I also agree to and understand the necessity for and give authority to the Center, its agents, or designees to release this information to the North Carolina Association of Broadcasters and/or its associates, to other commercial partners, and to essential State agencies and subsidiaries for the purpose of alerting the public about the abduction of my child.

As parent/legal custodian, I also understand that in order for the Center to activate the North Carolina AMBER Alert, the following criteria must be met:

1. The child is 17 years of age or younger;
2. The child is believed:
 - a. To have been abducted, or
 - b. To be in danger of injury or death;
3. The abduction is not known or suspected to be by a parent of the child, unless the child's life is suspected to be in danger;
4. The child is not believed to be a runaway or voluntarily missing; and
5. The abduction has been reported to and investigated by a law enforcement agency.

I am also aware I may be charged criminally for committing the crime of knowingly providing false information to law enforcement authorities. I have read and fully understand the contents of the agreement.

Print or Type Name _____

Signature _____