

A Quantum Moment™

Authentication and Release Form

Do you have a story to tell us? We want to hear it!

To submit a story for consideration of being used on our website, simply print this form and fill it out. Then mail it to us at the following address **along with a copy of your story**.

A Quantum Moment, LLC
700 Garden View Ct.
Suite 201E
Encinitas, CA 92024

NOTE: If your story is considered for publication on our website we will contact you to validate and/or clarify the story. Therefore, please provide ALL of the information requested below:

First Name: _____ Last Name: _____

City: _____ State / Province: _____ Country: _____

Phone Number: _____ Email Address: _____

Additional information about you we might want to know:

I certify that the story I have submitted to A Quantum Moment, LLC, is true and representative of the actual experience I've had. The story has not been altered in any way to enhance or skew the content or outcome of the story. I hereby give permission to the management of A Quantum Moment, LLC, to use this story as presented in any way deemed appropriate and release A Quantum Moment, LLC, from any liability that may arise from use of this story in the podcast or website.

Signed,

_____ Dated _____