MEDIA CONSENT FORM

I, _____________________________ understand that my story, photo and voice is my own and hereby grant my permission to _____________________________ to:

[ CHECK ALL THAT APPLY ]

☐ Interview me
☐ Record my voice
☐ Take pictures of my image
☐ Videotape me

I understand that the information I provide may be edited and shared both immediately and in the future with organization’s audiences on websites, in videos, and on other public online forums (email, social networking sites, newsletters, etc.). I consent under the condition that the following requirements are met:

[ CHECK ONE ]

☐ My image is used without being obscured.
☐ My image is obscured so as not to reveal my identity.
☐ My real name can be used.
☐ A pseudonym is used to protect my identity.
☐ My voice is used without masking.
☐ My voice is masked to protect my identity.

I understand that media shared on the internet is subject to sharing and is accessible globally. I have the right to retract my consent after the production of the video, website, etc. My interview, picture, voice, or video can be used by [media outlet] for:

[ CHECK ONE ]

☐ One time only for ________________
☐ Up to one year
☐ Up to one month
☐ Other: _________________________

OTHER CONDITIONS:

CLIENT SIGNATURE _____________________________ DATE ____________ GUARDIAN WITNESS _____________________________

ORGANIZATION SIGNATURE _____________________________ DATE ____________