



# Photo/Media Release Form

I, \_\_\_\_\_, hereby give permission to Washington Campus Coalition for the Public Good and its designees and grant funders (specifically, AmeriCorps) to use photographic images, audio, written work, art, voice, verbal statements and/or video footage of or by me in its public informational activities and marketing without compensation to me.

This could be used for public relations, publicity, event or project promotion, instruction, or training. Images may or may not personally identify the subject. I agree that no money shall be paid, consent and release have been given willingly, and the photographic images, audio, written work, art, voice, verbal statements and/or video footage may be used in the future. If the subject, or, in the case of a minor child, parent or guardian, wishes to rescind the agreement, they may do so at any time with written notice.

I hereby acknowledge that I have read and understand the terms of the release.

Signature (if this is for a minor[s], must be signed by parent/guardian) \_\_\_\_\_ Date \_\_\_\_\_

Your name (print) \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

**If signing for a minor (less than 18 years old), please complete the following:**

Name of minor(s) \_\_\_\_\_

Relationship to minor(s) \_\_\_\_\_

***Please send completed Photo/Media Release Forms to: Amy.Brown@wwu.edu.***