

MEDIA RELEASE FORM

Please complete a separate release form for each person featured in the materials. Please provide all the information asked for below.

Name: _____

Address: _____

Please check all that apply:

This material will be used in the form of

_____ News Release _____ Photographs _____ Video _____ Audio

Other (please specify) _____

to be used for the purpose of _____

by _____ Community Foundation for an indefinite period of time, unless specified below.

IF PERSON BEING USED IN THE MATERIAL IS UNDER 18 YEARS OF AGE, PARENT OR LEGAL GUARDIAN MUST SIGN THIS FORM.

I (we) give my (our) Permission to the _____ Community Foundation to use my name (or my child's name), city and state, and/or photograph, videotape, or any likeness for publicity and the use of statements made by or attributed to me (or my child) relating to the _____ Community Foundation for this or similar promotions and grant to the _____ Community Foundation any and all rights to said use without further compensation. It is my (our) understanding that my signature below releases the _____ Community Foundation from any financial or legal responsibility for the use of this media relations/promotional material(s).

Signed: _____

Date: _____

Permission granted: _____

Relationship: _____

NOTE: If person giving permission is parent or guardian, please state the relationship:

Please note: All signed release forms MUST be returned to the _____ Community Foundations within 10 days of receiving this form.