

## CONSENT TO PHOTOGRAPH CONSENT TO RELEASE INFORMATION

PLEASE	PRINT	CLEARLY	)
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I, \_\_\_\_\_

**DO DO NOT** give my permission to have Toy Rescue Mission (TRM) use my name and or photograph on its website, Facebook page or other methods of display for publicity or marketing purposes. I understand that all materials will remain the property of TRM and I am not entitled to any compensation or payment for their use.

I also acknowledge that for grant purposes some statistical information regarding me may be released to include race and gender.

Please place a check in each box that you are granting permission to TRM.

Audio	с	Print
Video		Other
D Photo	ograph	
1 ,	y name is used it is listed me and last initial or first and	as: d last name)
Date:		
Signature:		
Signature:	(Parent/guardian si	ignature required for minor under age 18)
Address:		
_	(Cit	ty, State, Zip)

PLEASE ENSURE THAT A CONSENT BOX IS CLEARLY MARKED ABOVE