

CONSENT TO PHOTOGRAPH, FILM, OR VIDEOTAPE A STUDENT OR MINOR

Name of Youth Advocate: _____

School/Organization: _____

I hereby consent to the participation in interviews, the use of quotes, and the taking of photographs, movies or video tapes of the Youth Advocate named above by:

I also grant to the right to edit, use, and reuse said products for nonprofit purposes including use in print, on the internet, and all other forms of media. I also hereby release the

_____ and its agents and employees from all claims, demands, and liabilities whatsoever in connection with the above.

Signature of Parent/Guardian (if Youth Advocate is under 18):

Date: _____

OR

Signature of Student (if 18 or over): _____

Date: _____