



STRATFORD PERTH
COMMUNITY
FOUNDATION

It all comes back to you

RELEASE FORM

I authorize the Stratford Perth Community Foundation (SPCF) to use and/or publish my name and any photographs, videos or audio recordings of me. I understand any of these images, videos or audio recordings may be used in promotional materials for the Stratford Perth Community Foundation (including, but not limited to, SPCF's website, social media channels, e-newsletters, and in print pieces such as annual reports, newspaper articles and advertising etc.) and may be shared with relevant organizations for their appropriate use, at the discretion of the Foundation. In every instance, SPCF will strive to present people in a complimentary and appropriate manner. Accreditation for photographs will be given as applicable.

Description of photograph, video and/or audio recording:

Name (please print): _____ Date: _____

Signature: _____

Parental/Guardian Consent for anyone under the age of 18.

I hereby give the Stratford Perth Community Foundation permission to use the name and any photographs, videos or audio recordings of _____, age: _____, in promotional materials for the organization as outlined above.

Name of parent/guardian (please print): _____ Date: _____

Signature of parent/guardian: _____

55 Lorne Avenue East, Unit 5 | Stratford ON N5A 6S4 | T 519-271-1503 | www.spccf.ca | @SPCCF



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