



Media Release Form

Complete this form and return.

I authorize the Stratford Perth Community Foundation 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, 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 Community Foundation. In every instance, the Community Foundation 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, audio recordings of _____, age: _____, in promotional materials for the organization as outlined above.

Name of parent/guardian: (please print)

Date:

Signature of parent/guardian: